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Image# 201604199012599092

### **FEC** FORM 3Y

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

| TOHW 3X                                                                                                                                | For Other Than An Au                                                    | thorized Committee                  | Office Use Only                                                                                                                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF<br>COMMITTEE (in full)                                                                                                         | TYPE OR PRINT ▼                                                         | Example: If typing, over the lines. | type 12FE4M5                                                                                                                                                                                    |
| New York Life Insura                                                                                                                   | nce Company Politica                                                    | Il Action Committee                 | e<br>                                                                                                                                                                                           |
|                                                                                                                                        |                                                                         |                                     |                                                                                                                                                                                                 |
| ADDRESS (number and street)  Check if different than previously                                                                        | Soom 1109                                                               |                                     | NV 40040                                                                                                                                                                                        |
| reported. (ACC)                                                                                                                        | New York                                                                |                                     | NY 10010 - L                                                                                                                                                                                    |
| 2. FEC IDENTIFICATION N                                                                                                                | NUMBER ▼ CI                                                             | TY▲                                 | STATE ▲ ZIP CODE ▲                                                                                                                                                                              |
| C C00158881                                                                                                                            |                                                                         | IS THIS X NEW (N)                   | OR AMENDED (A)                                                                                                                                                                                  |
| 4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report | (Q1) Report Due On: Ma  X Ap  (C) 12-Day  PRE-Election  Report for the: | r 20 (M3) Jun                       | 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M6) Sep 20 (M9) Dec 20 (M12 (Non-Election Year Only)) 20 (M7) Oct 20 (M10) Jan 31 (YE)  General (12G) Runoff (12R)  Special (12S) |
| January 31 Year-End Report July 31 Mid-Year Report (Non-elect Year Only) (MY) Termination Repo                                         | ion (d) 30-Day POST-Election Report for the:                            | General (30G)                       | State of  Runoff (30R)  Special (30S)                                                                                                                                                           |
| (TER)                                                                                                                                  | Electi                                                                  | on on                               | in the State of                                                                                                                                                                                 |
| 5. Covering Period                                                                                                                     | 03 01 2016                                                              | through                             | 03 31 2016                                                                                                                                                                                      |
| I certify that I have examined Type or Print Name of Treasu                                                                            | •                                                                       | f my knowledge and belie            | of it is true, correct and complete.                                                                                                                                                            |
| 7. 2 2. 1 1 1 3 31 1134341                                                                                                             |                                                                         |                                     | M M / D D / Y Y Y Y                                                                                                                                                                             |
| Signature of Treasurer Hea                                                                                                             | len Stagias                                                             | [Electronically Fil                 |                                                                                                                                                                                                 |
| NOTE: Submission of false, erro                                                                                                        | oneous, or incomplete information                                       | on may subject the person           | signing this Report to the penalties of 2 U.S.C. §437g.                                                                                                                                         |
| Office<br>Use<br>Only                                                                                                                  |                                                                         |                                     | FEC FORM 3X<br>Rev. 12/2004                                                                                                                                                                     |

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

#### New York Life Insurance Company Political Action Committee

Report Covering the Period: From: 03 01 2016 To: 03 31 2016

|     |                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|-----|--------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6.  | (a) Cash on Hand  January 1,  2016                                                               |                         | 685650.30                         |
|     | (b) Cash on Hand at Beginning of Reporting Period                                                | 689594.14               |                                   |
|     | (c) Total Receipts (from Line 19)                                                                | 121626.00               | 343069.84                         |
|     | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)         | 811220.14               | 1028720.14                        |
| 7.  | Total Disbursements (from Line 31)                                                               | 183000.00               | 400500.00                         |
| 8.  | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))                       | 628220.14               | 628220.14                         |
| 9.  | Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00                    |                                   |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)        | 0.00                    |                                   |

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### New York Life Insurance Company Political Action Committee

| I. Receipts                                                                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |  |  |
|------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|--|--|
| 11. Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees |                               |                                   |  |  |
| (i) Itemized (use Schedule A)                                                                        | 68901.18                      | 157808.20                         |  |  |
| (ii) Unitemized(iii) TOTAL (add                                                                      | 47724.82                      | 180261.64                         |  |  |
| Lines 11(a)(i) and (ii)                                                                              | 116626.00                     | 338069.84                         |  |  |
| (b) Political Party Committees                                                                       | 0.00                          | 0.00                              |  |  |
| (such as PACs)                                                                                       | 0.00                          | 0.00                              |  |  |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry                                  |                               |                                   |  |  |
| Totals to Line 33, page 5)  12. Transfers From Affiliated/Other                                      | 116626.00                     | 338069.84                         |  |  |
| Party Committees                                                                                     | 0.00                          | 0.00                              |  |  |
| 13. All Loans Received                                                                               | 0.00                          | 0.00                              |  |  |
| 14. Loan Repayments Received                                                                         | 0.00                          | 0.00                              |  |  |
| (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)                                           | 0.00                          | 0.00                              |  |  |
| <ol> <li>Refunds of Contributions Made<br/>to Federal Candidates and Other</li> </ol>                |                               |                                   |  |  |
| Political Committees                                                                                 | 5000.00                       | 5000.00                           |  |  |
| (Dividends, Interest, etc.)                                                                          | 0.00                          | 0.00                              |  |  |
| (from Schedule H3)                                                                                   | 0.00                          | 0.00                              |  |  |
| (b) Levin Funds (from Schedule H5)                                                                   | 0.00                          | 0.00                              |  |  |
| (c) Total Transfers (add 18(a) and 18(b))                                                            | 0.00                          | 0.00                              |  |  |
|                                                                                                      |                               |                                   |  |  |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶                             | 121626.00                     | 343069.84                         |  |  |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶                                       | 121626.00                     | 343069.84                         |  |  |

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                                                  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |  |  |
|--------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|--|--|
| 21. Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                         |                               | Caronau Tour-to-Date              |  |  |
| (i) Federal Share                                                                                                  | 0.00                          | 0.00                              |  |  |
| (ii) Non-Federal Share                                                                                             | 0.00                          | 0.00                              |  |  |
| (b) Other Federal Operating  Expenditures                                                                          | 0.00                          | 0.00                              |  |  |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶                                                 | 0.00                          | 0.00                              |  |  |
| 2. Transfers to Affiliated/Other Party                                                                             | 0.00                          | 0.00                              |  |  |
| Committees  23. Contributions to Federal Candidates/Committees and Other Political Committees                      | 183000.00                     | 400500.00                         |  |  |
| 4. Independent Expenditures                                                                                        | 0.00                          | 0.00                              |  |  |
| (use Schedule E)                                                                                                   | 0.00                          | 0.00                              |  |  |
| (use Schedule F)                                                                                                   | 0.00                          | 0.00                              |  |  |
| 6. Loan Repayments Made                                                                                            | 0.00                          | 0.00                              |  |  |
| 7. Loans Made8. Refunds of Contributions To:                                                                       | 0.00                          | 0.00                              |  |  |
| (a) Individuals/Persons Other Than Political Committees                                                            | 0.00                          | 0.00                              |  |  |
| (b) Political Party Committees                                                                                     | 0.00                          | 0.00                              |  |  |
| (c) Other Political Committees (such as PACs)                                                                      | 0.00                          | 0.00                              |  |  |
| (d) Total Contribution Refunds                                                                                     |                               |                                   |  |  |
| (add Lines 28(a), (b), and (c))▶                                                                                   | 0.00                          | 0.00                              |  |  |
| 9. Other Disbursements                                                                                             | 0.00                          | 0.00                              |  |  |
| O. Federal Election Activity (2 U.S.C. §431(20))  (a) Allocated Federal Election Activity  (4 Control of the Mark) |                               |                                   |  |  |
| (from Schedule H6) (i) Federal Share                                                                               | 0.00                          | , , , 0.00                        |  |  |
| (ii) "Levin" Share                                                                                                 | 0.00                          | 0.00                              |  |  |
| (b) Federal Election Activity Paid Entirely With Federal Funds                                                     | 0.00                          | 0.00                              |  |  |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶                                     | 0.00                          | 0.00                              |  |  |
| 1. Total Disbursements (add Lines 21(c), 22,                                                                       |                               |                                   |  |  |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c))                                                                           | 183000.00                     | 400500.00                         |  |  |
| 2. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)                                         |                               |                                   |  |  |
| from Line 31)                                                                                                      | 183000.00                     | 400500.00                         |  |  |

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                               |           |           |  |
|-----------------------------------------------------------------------------|-----------|-----------|--|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3)         | 116626.00 | 338069.84 |  |
| 4. Total Contribution Refunds (from Line 28(d))                             | 0.00      | 0.00      |  |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33)     | 116626.00 | 338069.84 |  |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 0.00      | 0.00      |  |
| 7. Offsets to Operating Expenditures (from Line 15, page 3)                 | 0.00      | 0.00      |  |
| 3. Net Operating Expenditures (subtract Line 37 from Line 36)               | 0.00      | 0.00      |  |

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Valerie L. Perry Date of Receipt Mailing Address 51-19 Overbrook Street 2016 31 City Zip Code State Transaction ID: PR10009514206 NY Douglaston 11362-1642 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Sid Phillips Date of Receipt Mailing Address 3505 Pasture Lane 03 31 2016 City State Zip Code Transaction ID: PR10020814206 VA Virginia Beach 23453-8534 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Rudy Pope Date of Receipt Mailing Address 28 Eagle Ridge Drive 03 31 2016 City Zip Code State Transaction ID: PR10037114206 GA Savannah 31406-8420 Amount of Each Receipt this Period FEC ID number of contributing С 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 253.88 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: **PAGE** 7 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Lucas Quaccia Date of Receipt Mailing Address 10728 Satin Nickel Drive 2016 31 City Zip Code State Transaction ID: PR10053514206 CA Fresno 93730-3591 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Daniel Rioux Date of Receipt Mailing Address 4208 127th Street Court Northwest 03 31 2016 City State Zip Code Transaction ID: PR10092414206 WA Gig Harbor 98332-8817 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) Other (specify) 230.76 Full Name (Last, First, Middle Initial) c. Mr. Darin J. Robinson Date of Receipt Mailing Address 15 Portland Place 03 31 2016 City Zip Code State Transaction ID: PR10100614206 MO Saint Louis 63108-1203 Amount of Each Receipt this Period FEC ID number of contributing С 208.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.34 Monthly) 625.02 Other (specify) 516.04 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 8 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                                                                          | for each category of the Detailed Summary Page                 | X   11a                                                                                |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------------------------------|--|--|--|--|--|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the           |                                                                |                                                                                        |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                                 | pany Political Action Committee                                |                                                                                        |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Walton W. Rogers  Mailing Address 504 Pinefield Drive        | Date of Receipt                                                |                                                                                        |  |  |  |  |  |  |
| City Severna Park                                                                                         | State Zip Code MD 21146-2320                                   | 03 31 2016  Transaction ID : PR10110714206  Amount of Each Receipt this Period         |  |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                                | C                                                              | 83.34                                                                                  |  |  |  |  |  |  |
| Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼       | Occupation Agent  Aggregate Year-to-Date ▼  250.02             | P/R Deduction (\$83.34 Monthly)                                                        |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Ricardo Rosales  Mailing Address 6852 Northwest 113th Place  |                                                                | Date of Receipt                                                                        |  |  |  |  |  |  |
| City  Doral  FEC ID number of contributing                                                                | State Zip Code<br>FL 33178-4547                                | Transaction ID : PR10115914206  Amount of Each Receipt this Period                     |  |  |  |  |  |  |
| federal political committee.  Name of Employer New York Life Insurance Company                            | Occupation Agent                                               | Memo Item                                                                              |  |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                          | Aggregate Year-to-Date ▼ 300.00                                | P/R Deduction (\$100.00 Monthly)                                                       |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Richard K. Ryan  Mailing Address 2464 Barnwall Court         |                                                                | Date of Receipt                                                                        |  |  |  |  |  |  |
| City Tucson  FEC ID number of contributing federal political committee.                                   | State Zip Code<br>AZ 85749-5203                                | 03 31 2016  Transaction ID : PR10136214206  Amount of Each Receipt this Period  100.00 |  |  |  |  |  |  |
| Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify)   Other | Occupation  Managing Partner  Aggregate Year-to-Date ▼  300.00 | P/R Deduction (\$50.00 Bi-Weekly)                                                      |  |  |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                                 |                                                                | 283.34                                                                                 |  |  |  |  |  |  |
| TOTAL This Period (last page this line number                                                             | only)                                                          |                                                                                        |  |  |  |  |  |  |

FOR LINE NUMBER: **PAGE** 9 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Gary W. Sandifer Date of Receipt Mailing Address 47106 Hidden Lane 2016 31 City State Zip Code Transaction ID: PR10150114206 Hammond LA 70401-4859 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.00 Monthly) 233.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brett M. Sause Date of Receipt Mailing Address 13474 Rustling Oaks Drive 03 31 2016 City State Zip Code Transaction ID: PR10157714206 MD Wye Mills 21679-2029 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Marc L. Schaefer Date of Receipt Mailing Address 10912 Lamplighter Lane 03 31 2016 City Zip Code State Transaction ID: PR10161114206 MD Potomac 20854-2783 Amount of Each Receipt this Period FEC ID number of contributing С 150.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Monthly) 450.00 Other (specify) 483.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                   | FO   | R LINE   | NU    | MBER | : | PAGE | • | 10 OF | 175 |
|---------------------------------------------------|------|----------|-------|------|---|------|---|-------|-----|
| Use separate schedule(s) for each category of the | (che | eck only | or or | ne)  |   |      |   |       |     |
| Detailed Summary Page                             | [×   | 11a      |       | 11b  |   | 11c  |   | 12    |     |
|                                                   |      | 13       |       | 14   |   | 15   |   | 16    | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Sidney L. Seligstein Date of Receipt Mailing Address 1568 Massey Pointe Lane 31 2016 City Zip Code State Transaction ID: PR10184314206 TN Memphis 38120-1317 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael A. Stefano, III Date of Receipt Mailing Address 18 Quaker Manor Lane 03 31 2016 City State Zip Code Transaction ID: PR10265714206 NY Patterson 12563-2347 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82 Full Name (Last, First, Middle Initial) **c.** Mr. Billy J. Watson Date of Receipt Mailing Address 3435 Indian Lake Trail 03 31 2016 Zip Code City State Transaction ID: PR103714206 AL Pelham 35124-2718 Amount of Each Receipt this Period FEC ID number of contributing С 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) 258.02 Other (specify) 268.28

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 11 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Jerry L. Spivey Date of Receipt Mailing Address 1307 Fairway Drive 2016 31 City State Zip Code Transaction ID: PR104814206 GA Elberton 30635-2611 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 255.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Julie E. Herwig Date of Receipt Mailing Address 8405 Kingsgate Road 03 31 2016 City State Zip Code Transaction ID: PR10501214206 MD Potomac 20854-1741 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Bi-Weekly) Other (specify) 465,00 Full Name (Last, First, Middle Initial) c. Mr. Warren C. Budd Jr. Date of Receipt Mailing Address PO Box 1723 03 31 2016 City Zip Code State Transaction ID: PR105014206 GA Newnan 30264-1723 Amount of Each Receipt this Period FEC ID number of contributing С 91.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.33 Monthly) 265.99 Other (specify) 476.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                  | for each category of the  Detailed Summary Page                                         | X   11a                                                                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and Sta or for commercial purposes, other than using the                                                                                                                                                                                 | atements may not be sold or used by any pename and address of any political committee   | rson for the purpose of soliciting contributions                                                                                                    |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                        | ny Political Action Committee                                                           |                                                                                                                                                     |
| Full Name (Last, First, Middle Initial)  Mr. Samuel Y. Friedman  Mailing Address 2 Fawn Hill Drive  City    Airmont  FEC ID number of contributing federal political committee.  Name of Employer    New York Life Insurance Company    Receipt For:                              | State Zip Code NY 10952-4403  C  Occupation Agent  Aggregate Year-to-Date ▼  250.02     | Date of Receipt  03 31 2016  Transaction ID: PR10605014206  Amount of Each Receipt this Period  83.34  Memo Item  P/R Deduction (\$83.34 Monthly)   |
| Full Name (Last, First, Middle Initial)  Mr. James R. Vandre  Mailing Address 17335 Robinson Road  City  Marysville  FEC ID number of contributing                                                                                                                                | State Zip Code OH 43040-9029                                                            | Date of Receipt    M                                                                                                                                |
| Receipt For:  Primary  Other (specify) ▼  Name of Employer  New York Life Insurance Company  General  Other (specify) ▼                                                                                                                                                           | Occupation Agent  Aggregate Year-to-Date ▼  300.00                                      | P/R Deduction (\$100.00 Monthly)                                                                                                                    |
| Full Name (Last, First, Middle Initial)  Mr. Wayne W. Harrison  Mailing Address 12657 Gallant Place  City Raleigh  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State Zip Code NC 27614-7942  C  Occupation  Managing Partner  Aggregate Year-to-Date ▼ | Date of Receipt  03 31 2016  Transaction ID: PR10630214206  Amount of Each Receipt this Period  76.94  Memo Item  P/R Deduction (\$38.47 Bi-Weekly) |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                         |                                                                                         | 260.28                                                                                                                                              |
| TOTAL This Period (last page this line number o                                                                                                                                                                                                                                   | <u></u>                                                                                 |                                                                                                                                                     |

FOR LINE NUMBER: PAGE 13 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Tigran Basmadjyan Date of Receipt Mailing Address 660 Bohlig Road 2016 31 City Zip Code State Transaction ID: PR10630314206 CA Glendale 91207-1402 Amount of Each Receipt this Period FEC ID number of contributing 230.76 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.38 Bi-Weekly) 692.28 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John A. Ginn III Date of Receipt Mailing Address 401 Prince Road 03 31 2016 City State Zip Code Transaction ID: PR108214206 FL Saint Augustine 32086-4906 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Gary T. Baumgarten Date of Receipt Mailing Address 230 W Reading Way 03 31 2016 City State Zip Code Transaction ID: PR108414206 FL Winter Park 32789-6052 Amount of Each Receipt this Period FEC ID number of contributing С 175.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$175.00 Monthly) 508.34 Other (specify) 489.10 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOF  | R LINE  | NU | IMBER | : | PAGE | 1 | 14 OF | = | 175 |
|------------------------------------------------|------|---------|----|-------|---|------|---|-------|---|-----|
| Use separate schedule(s)                       | (che | ck only | or | ne)   |   |      |   |       |   |     |
| for each category of the Detailed Summary Page | X    | 11a     |    | 11b   |   | 11c  |   | 12    |   |     |
| ,,g.                                           |      | 13      |    | 14    |   | 15   |   | 16    |   | 17  |

| Any information copied from such Reports and S<br>or for commercial purposes, other than using the | tatements may not be sold or used by any personame and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |
|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--|--|--|
| NAME OF COMMITTEE (In Full)                                                                        |                                                                                              |                                                                                           |  |  |  |
| New York Life Insurance Compa                                                                      | any Political Action Committee                                                               |                                                                                           |  |  |  |
| Full Name (Last, First, Middle Initial)  A. Mr. Reginald S. Sedita                                 |                                                                                              | Date of Receipt                                                                           |  |  |  |
| Mailing Address 10908 Whitecap Drive                                                               |                                                                                              | 03 31 2016                                                                                |  |  |  |
| City                                                                                               | State Zip Code                                                                               | Transaction ID : PR108614206                                                              |  |  |  |
| Riverview                                                                                          | FL 33579-7157                                                                                | Amount of Each Receipt this Period                                                        |  |  |  |
| FEC ID number of contributing federal political committee.                                         | С                                                                                            | 100.00                                                                                    |  |  |  |
| Name of Employer                                                                                   | Occupation                                                                                   | Memo Item                                                                                 |  |  |  |
| New York Life Insurance Company                                                                    | Agent                                                                                        |                                                                                           |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                   | Aggregate Year-to-Date ▼  300.00                                                             | P/R Deduction (\$100.00 Monthly)                                                          |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Frank B. Dolph III                                    |                                                                                              | Date of Receipt                                                                           |  |  |  |
| Mailing Address 631 Intracoastal Drive                                                             |                                                                                              | M M / D D / Y Y Y Y Y                                                                     |  |  |  |
| City                                                                                               | State Zip Code                                                                               | 03 31 2016 Transaction ID : PP100814206                                                   |  |  |  |
| Fort Lauderdale                                                                                    | FL 33304-3618                                                                                | Transaction ID : PR109814206  Amount of Each Receipt this Period                          |  |  |  |
|                                                                                                    |                                                                                              | Amount of Lacif Heceipt tills Fellod                                                      |  |  |  |
| FEC ID number of contributing federal political committee.                                         | C                                                                                            | 250.00                                                                                    |  |  |  |
| Name of Employer                                                                                   | Occupation                                                                                   | Memo Item                                                                                 |  |  |  |
| Name of Employer  New York Life Insurance Company                                                  | Agent                                                                                        | _                                                                                         |  |  |  |
| Receipt For:                                                                                       |                                                                                              |                                                                                           |  |  |  |
| Primary General Other (specify) ▼                                                                  | Aggregate Year-to-Date ▼  750.00                                                             | P/R Deduction (\$250.00 Monthly)                                                          |  |  |  |
| Full Name (Last, First, Middle Initial)  C. Mr. Curtis L. Eskew Jr.                                |                                                                                              | Date of Receipt                                                                           |  |  |  |
| Mailing Address 1680 Keely Lane                                                                    |                                                                                              | 03 31 _ 2016 _                                                                            |  |  |  |
| City                                                                                               | State Zip Code                                                                               | Transaction ID : PR110114206                                                              |  |  |  |
| Sarasota                                                                                           | FL 34232-3061                                                                                | Amount of Each Receipt this Period                                                        |  |  |  |
| FEC ID number of contributing federal political committee.                                         | С                                                                                            | 174.67                                                                                    |  |  |  |
| Name of Employer                                                                                   | Occupation                                                                                   | Memo Item                                                                                 |  |  |  |
| New York Life Insurance Company                                                                    |                                                                                              |                                                                                           |  |  |  |
| Receipt For:                                                                                       | Aggregate Year-to-Date ▼                                                                     |                                                                                           |  |  |  |
| Primary General                                                                                    |                                                                                              | P/R Deduction (\$174.67 Monthly)                                                          |  |  |  |
| Other (specify) ▼                                                                                  | 516.01                                                                                       |                                                                                           |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                          |                                                                                              | 524.67                                                                                    |  |  |  |
| TOTAL This Period (last page this line number                                                      | only)                                                                                        |                                                                                           |  |  |  |

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| Τ         | EMIZED RECEIPTS                                                                                                                                                                                                                                                 |                            | for each category of the<br>Detailed Summary Page | X   11a                                                                                                         |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
|           | y information copied from such Reports and Sta<br>for commercial purposes, other than using the i                                                                                                                                                               |                            |                                                   |                                                                                                                 |
| $\rangle$ | NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                      | ny Politi                  | cal Action Committee                              |                                                                                                                 |
| Δ.        | Full Name (Last, First, Middle Initial) Mr. Mark F. Bailey  Mailing Address 1200 Plantation Island Dr. S Ste  City Saint Augustine  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For: | State FL  Occupation Agent | Zip Code<br>32080-3113<br>Year-to-Date ▼          | Date of Receipt  03 31 2016  Transaction ID: PR110614206  Amount of Each Receipt this Period  250.00  Memo Item |
|           | Primary General Other (specify) ▼                                                                                                                                                                                                                               | Aggregate                  | 750.00                                            | P/R Deduction (\$250.00 Monthly)                                                                                |
| 3.        | Full Name (Last, First, Middle Initial)  Mr. Thomas G. Krach  Mailing Address 3580 Southwest 146 Terrace                                                                                                                                                        |                            |                                                   | Date of Receipt  03 31 2016                                                                                     |
|           | City<br>Miramar                                                                                                                                                                                                                                                 | State<br>FL                | Zip Code<br>33027-3741                            | Transaction ID : PR111114206  Amount of Each Receipt this Period                                                |
|           | FEC ID number of contributing federal political committee.  Name of Employer                                                                                                                                                                                    | C                          |                                                   | 100.00<br>Memo Item                                                                                             |
|           | New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                               | Senior Partr               |                                                   | P/R Deduction (\$50.00 Bi-Weekly)                                                                               |
| С.        | Full Name (Last, First, Middle Initial)  Mr. William Lyon  Mailing Address 3084 Crooked Stick Court                                                                                                                                                             |                            |                                                   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                    |
|           | City<br>Cincinnati                                                                                                                                                                                                                                              | State<br>OH                | Zip Code<br>45244-2586                            | Transaction ID : PR111414206  Amount of Each Receipt this Period                                                |
|           | FEC ID number of contributing federal political committee.                                                                                                                                                                                                      | C                          |                                                   | 250.00                                                                                                          |
|           | Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                             | Agent Aggregate            | Year-to-Date ▼<br>750.00                          | P/R Deduction (\$250.00 Monthly)                                                                                |
| s         | UBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                        |                            | •                                                 | 600.00                                                                                                          |
| Т         | OTAL This Period (last page this line number or                                                                                                                                                                                                                 | nly)                       | <b>_</b>                                          |                                                                                                                 |

FOR LINE NUMBER: (check only one) PAGE 16 OF 175 Use separate schedule(s)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                      | for each category of the<br>Detailed Summary Page                                   | X   11a                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and St or for commercial purposes, other than using the                                                                                                                                                                                      |                                                                                     |                                                                                                                                       |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                            | any Political Action Committee                                                      |                                                                                                                                       |
| Full Name (Last, First, Middle Initial)  Mr. Timothy I. Miller  Mailing Address 222 Thorndike Street  City  Dunstable  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State Zip Code MA 01827-1415  C Occupation Senior Partner  Aggregate Year-to-Date ▼ | Date of Receipt  03 31 2016  Transaction ID : PR1114206  Amount of Each Receipt this Period  76.94  P/R Deduction (\$38.47 Bi-Weekly) |
| Full Name (Last, First, Middle Initial)  Mr. Mark I. Burton  Mailing Address 22781 Foxridge                                                                                                                                                                                           | 230.02                                                                              | Date of Receipt                                                                                                                       |
| City Mission Viejo  FEC ID number of contributing federal political committee.  Name of Employer                                                                                                                                                                                      | State Zip Code CA 92692-4703  C Occupation                                          | 03 31 2016  Transaction ID: PR111714206  Amount of Each Receipt this Period  250.00  Memo Item                                        |
| New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                     | Agent  Aggregate Year-to-Date ▼  750.00                                             | P/R Deduction (\$250.00 Monthly)                                                                                                      |
| Full Name (Last, First, Middle Initial) Mr. David R. Colflesh  Mailing Address PO Box 37  City                                                                                                                                                                                        | State Zip Code                                                                      | Date of Receipt  03 31 2016  Transaction ID : PR111814206                                                                             |
| FEC ID number of contributing federal political committee.                                                                                                                                                                                                                            | MO 64491-0037                                                                       | Amount of Each Receipt this Period  20.84  Memo Item                                                                                  |
| Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                   | Occupation Agent Aggregate Year-to-Date ▼  520.84                                   | P/R Deduction (\$20.84 Monthly)                                                                                                       |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                             | <b>&gt;</b>                                                                         | 347.78                                                                                                                                |
| TOTAL This Period (last page this line number of                                                                                                                                                                                                                                      | only)                                                                               |                                                                                                                                       |

|                                                | FOR LINE NUMBER: |                  |  |     |  | PAGE | 1 | 7 0 | F | 175 |  |
|------------------------------------------------|------------------|------------------|--|-----|--|------|---|-----|---|-----|--|
| Use separate schedule(s)                       | (che             | (check only one) |  |     |  |      |   |     |   |     |  |
| for each category of the Detailed Summary Page | ×                | 11a              |  | 11b |  | 11c  |   | 12  |   |     |  |
|                                                |                  | 13               |  | 14  |  | 15   |   | 16  |   | 17  |  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. James K. Bork Date of Receipt Mailing Address 2426 Gibley Park Road 31 2016 City Zip Code State Transaction ID: PR112214206 OH Toledo 43617-2233 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Monthly) 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Larry E. Beebe Date of Receipt Mailing Address 3209 Stone Wall Road 03 31 2016 City State Zip Code Transaction ID: PR113414206 OH 43537-9593 Maumee Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$200.00 Monthly) Other (specify) 600,00 Full Name (Last, First, Middle Initial) c. Mr. Willard L. Hensel Date of Receipt Mailing Address 1103 Sequoia Drive Northwest 03 31 2016 City State Zip Code Transaction ID: PR113914206 OH Strasburg 44680-9519 Amount of Each Receipt this Period FEC ID number of contributing С 91.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent

Aggregate Year-to-Date ▼

257.99

FE6AN026

Receipt For:

Primary

Other (specify)

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

366.33

P/R Deduction (\$91.33 Monthly)

9

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FOR LINE NUMBER: PAGE 19 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Mark Vahala Date of Receipt Mailing Address 500 Cedar Elm Court 2016 31 City State Zip Code Transaction ID: PR120614206 TX Irving 75063-8467 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Steven C. Perry Date of Receipt Mailing Address 9411 Elmore Road 03 31 2016 City State Zip Code Transaction ID: PR12071814206 ΑK 99507-4221 Anchorage Amount of Each Receipt this Period FEC ID number of contributing 230.76 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.38 Bi-Weekly) Other (specify) 692,28 Full Name (Last, First, Middle Initial) c. Mr. Zarir Sethna Date of Receipt Mailing Address 2211 Crescent Palm Lane 03 31 2016 City Zip Code State Transaction ID: PR121214206 TX Houston 77077-2133 Amount of Each Receipt this Period FEC ID number of contributing С 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) 249.99 Other (specify) 564.09 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOR LINE NUMBER: |     |  |     |  | PAGE | 2 | 20 OF | - | 175 |
|------------------------------------------------|------------------|-----|--|-----|--|------|---|-------|---|-----|
| Use separate schedule(s)                       | (check only one) |     |  |     |  |      |   |       |   |     |
| for each category of the Detailed Summary Page | X                | 11a |  | 11b |  | 11c  |   | 12    |   |     |
|                                                |                  | 13  |  | 14  |  | 15   |   | 16    |   | 17  |

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

| Full Name (Last, First, Middle Initial)  Mr. David E. Levee   |                                  | Date of Receipt                                                  |
|---------------------------------------------------------------|----------------------------------|------------------------------------------------------------------|
| Mailing Address 4509 White Cedar Lane                         |                                  | 03 31 2016                                                       |
| City                                                          | State Zip Code                   | Transaction ID : PR122914206                                     |
| Delray Beach                                                  | FL 33445-7036                    | Amount of Each Receipt this Period                               |
| FEC ID number of contributing federal political committee.    | C                                | 100.00                                                           |
| Name of Employer                                              | Occupation                       | Memo Item                                                        |
| New York Life Insurance Company                               | Agent                            |                                                                  |
| Receipt For:  Primary General  Other (specify) ▼              | Aggregate Year-to-Date ▼ 300.00  | P/R Deduction (\$100.00 Monthly)                                 |
| Full Name (Last, First, Middle Initial) Mr. Curtis T. Schultz |                                  | Date of Receipt                                                  |
| Mailing Address 2204 Cherokee Circle                          |                                  | 03 31 2016                                                       |
| City                                                          | State Zip Code                   | Transaction ID : PR125214206                                     |
| Valparaiso                                                    | IN 46383-2284                    | Amount of Each Receipt this Period                               |
| FEC ID number of contributing federal political committee.    | C                                | 416.66                                                           |
| Name of Employer                                              | Occupation                       | Memo Item                                                        |
| New York Life Insurance Company                               | Agent                            |                                                                  |
| Receipt For:                                                  | Aggregate Year-to-Date ▼         |                                                                  |
| Primary General Other (specify) ▼                             | 1249.98                          | P/R Deduction (\$416.66 Monthly)                                 |
| Full Name (Last, First, Middle Initial) Mr. Joseph H. Lee Sr. |                                  | Date of Receipt                                                  |
| Mailing Address 16640 Kehrsgrove Drive                        |                                  | M = M / D = D / Y = Y = Y                                        |
| City                                                          | State Zip Code                   | 03 31 2016                                                       |
| Chesterfield                                                  | MO 63005-4539                    | Transaction ID : PR125414206  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.    | C                                | 83.34                                                            |
| Name of Employer                                              | Occupation                       | Memo Item                                                        |
| New York Life Insurance Company                               | Agent                            |                                                                  |
| Receipt For:  Primary General  Other (specify) ▼              | Aggregate Year-to-Date ▼  250.02 | P/R Deduction (\$83.34 Monthly)                                  |
| NIDTOTAL of Provints This Prove (astismal)                    |                                  | 600.00                                                           |

FOR LINE NUMBER: PAGE 21 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Larry D. Massey Date of Receipt Mailing Address 3761 Mountain Way Cove 2016 31 City Zip Code State Transaction ID: PR126614206 GA 30039-8413 Snellville Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Monthly) 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Thomas N. Gavin Date of Receipt Mailing Address 449 Vista Court 03 31 2016 City State Zip Code Transaction ID: PR126814206 CA Benicia 94510-2715 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Amrit L. Mittal Date of Receipt Mailing Address 215 Rugeley Road 03 31 2016 City State Zip Code Transaction ID: PR127914206 IL Western Springs 60558-1954 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 425.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 22 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Steven J. Heussner Date of Receipt Mailing Address 1105 Pecan Hollow Trail 2016 31 City Zip Code State Transaction ID: PR130714206 TX 75070-9060 McKinney Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Monthly) 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David J. Duchene Date of Receipt Mailing Address 25 Kingsview Lane N 03 31 2016 City State Zip Code Transaction ID: PR131514206 MN Plymouth 55447-4319 Amount of Each Receipt this Period FEC ID number of contributing 95.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$95.00 Monthly) Other (specify) 273.34 Full Name (Last, First, Middle Initial) c. Mr. G. Joseph Pasman, Jr. Date of Receipt Mailing Address 7397 Heather Ridge Court Southeast 03 31 2016 Zip Code City State Transaction ID: PR133014206 MI Caledonia 49316-9010 Amount of Each Receipt this Period FEC ID number of contributing С 174.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$174.67 Monthly) 508.01 Other (specify) 419.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                   | for each category of the Detailed Summary Page         | X 11a 11b 11c 12 13 14 15 16 17                                  |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------|--|--|--|--|--|
| Any information copied from such Reports and St or for commercial purposes, other than using the   |                                                        |                                                                  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                         | ny Political Action Committee                          |                                                                  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Brian T. Nowak  Mailing Address 104 Plaza Viaduct Sol | Date of Receipt                                        |                                                                  |  |  |  |  |  |
| City                                                                                               | State Zip Code                                         | 03 31 2016 Transaction ID : PR133414206                          |  |  |  |  |  |
| San Clemente                                                                                       | CA 92673-6705                                          | Amount of Each Receipt this Period                               |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                         | C                                                      | 230.78                                                           |  |  |  |  |  |
| Name of Employer  New York Life Insurance Company                                                  | Occupation  Managing Partner                           | Memo Item                                                        |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                   | Aggregate Year-to-Date ▼  692.34                       | P/R Deduction (\$115.39 Bi-Weekly)                               |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  3. Ms. Varda N. Fink                                      |                                                        | Date of Receipt                                                  |  |  |  |  |  |
| Mailing Address 13325 Old Forge Road                                                               | 03 31 2016                                             |                                                                  |  |  |  |  |  |
| City<br>Silver Spring                                                                              | State         Zip Code           MD         20904-6328 | Transaction ID : PR133514206  Amount of Each Receipt this Period |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                         | C                                                      | 100.00                                                           |  |  |  |  |  |
| Name of Employer  New York Life Insurance Company                                                  | Occupation<br>Agent                                    | Memo Item                                                        |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                   | Aggregate Year-to-Date ▼  300.00                       | P/R Deduction (\$100.00 Monthly)                                 |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  C. Mr. William D. Heiting                                 |                                                        | Date of Receipt                                                  |  |  |  |  |  |
| Mailing Address 1612 Luther Court                                                                  |                                                        | 03 31 2016                                                       |  |  |  |  |  |
| City<br>Marshfield                                                                                 | State Zip Code<br>WI 54449-6014                        | Transaction ID : PR133914206  Amount of Each Receipt this Period |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                         | C                                                      | 83.34                                                            |  |  |  |  |  |
| Name of Employer                                                                                   | Occupation                                             | Memo Item                                                        |  |  |  |  |  |
| New York Life Insurance Company                                                                    | Agent                                                  |                                                                  |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                   | Aggregate Year-to-Date ▼  250.02                       | P/R Deduction (\$83.34 Monthly)                                  |  |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                          |                                                        | 414.12                                                           |  |  |  |  |  |
| TOTAL This Period (last page this line number of                                                   | <u> </u>                                               |                                                                  |  |  |  |  |  |

FOR LINE NUMBER: PAGE 24 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Michael J. Jungen Date of Receipt Mailing Address N81W23285 Five Iron Way 2016 31 City Zip Code State Transaction ID: PR134614206 WI 53089-1558 Sussex Amount of Each Receipt this Period FEC ID number of contributing 108.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$108.00 Monthly) 316.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Scott Scheer Date of Receipt Mailing Address 101 E Wayfarer Lane 03 31 2016 City State Zip Code Transaction ID: PR135014206 WI Appleton 54913-6353 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. George N. Ridings Date of Receipt Mailing Address 887 West Main Street PO Box 1750 03 31 2016 City Zip Code State Transaction ID: PR136214206 KY Richmond 40475-1169 Amount of Each Receipt this Period FEC ID number of contributing С 200.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$200.00 Monthly) 500.00 Other (specify) 408.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 25 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Steven R. Kaneski Date of Receipt Mailing Address 9692 Sterling Pointe Court 2016 31 City Zip Code State Transaction ID: PR141214206 CA Loomis 95650-7120 Amount of Each Receipt this Period FEC ID number of contributing 416.66 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$416.66 Monthly) 1249.98 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Lloyd R. Wilson Sr. Date of Receipt Mailing Address 3148 Pine Ridge Road 03 31 2016 City State Zip Code Transaction ID: PR141614206 Mountain Brk AL 35213-3906 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Ross-Morris Sims Date of Receipt Mailing Address 91 Valley View Road 03 31 2016 Zip Code State Transaction ID: PR142114206 NY Cortlandt Manor 10567-1235 Amount of Each Receipt this Period FEC ID number of contributing С 160.00 federal political committee. Memo Item Name of Employer Occupation Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$80.00 Bi-Weekly) 470.79 Other (specify) 826.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 26 OF 175 Use separate schedule(s) (check only one) X 11a 11b 12 11c

ITEMIZED RECEIPTS for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Timothy M. Ellen Date of Receipt Mailing Address 113 Highland Pointe Drive 2016 31 City Zip Code State Transaction ID: PR142814206 GA Lagrange 30240-3791 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joseph W. Donaldson Date of Receipt Mailing Address 711 Forestdale Drive 03 31 2016 City State Zip Code Transaction ID: PR143714206 AL Montgomery 36109-4403 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Jerry D. Coats Date of Receipt Mailing Address 165 Pebble Beach Drive 03 31 2016 City Zip Code State Transaction ID: PR145614206 AR Little Rock 72212-2645 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 433.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 27 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Sharon Welch-Blair Date of Receipt Mailing Address 2120 Louisiana Street 2016 31 City Zip Code State Transaction ID: PR146614206 AR 72206-1522 Little Rock Amount of Each Receipt this Period FEC ID number of contributing 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) 258.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Thomas L. McConathy Date of Receipt Mailing Address 11813 Towering Oaks Drive 03 31 2016 City State Zip Code Transaction ID: PR146914206 LA **Baton Rouge** 70810-3162 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34 Full Name (Last, First, Middle Initial) c. Ms. Kathleen Davenport Date of Receipt Mailing Address 1337 Huron Avenue 03 31 2016 City Zip Code State Transaction ID: PR147614206 Metairie LA 70005-1233 Amount of Each Receipt this Period FEC ID number of contributing С 108.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$108.00 Monthly) 308.00 Other (specify) 430.12 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                  | for each category of the<br>Detailed Summary Page                                              | X   11a                                                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                                   |                                                                                                |                                                                                                                |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                        | any Political Action Committee                                                                 |                                                                                                                |
| Full Name (Last, First, Middle Initial)  Mr. Tim C. Fitzgerald  Mailing Address 12086 Ellerbe Road  City Shreveport  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) | State Zip Code LA 71115-9568  C  Occupation Agent  Aggregate Year-to-Date ▼                    | Date of Receipt    M                                                                                           |
| Full Name (Last, First, Middle Initial)  Ms. Tina Dandry Mayes  Mailing Address 2604 Oak Forest Boulevard  City  Marrero  FEC ID number of contributing federal political committee.  Name of Employer                                                                            | State Zip Code LA 70072-6642  C                                                                | Date of Receipt  03 31 2016  Transaction ID: PR150614206  Amount of Each Receipt this Period  83.34  Memo Item |
| New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                 | Aggregate Year-to-Date ▼  216.68                                                               | P/R Deduction (\$83.34 Monthly)                                                                                |
| Full Name (Last, First, Middle Initial)  Mr. John B. Stagg  Mailing Address 5409 East 80th Place  City Tulsa  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify)        | State Zip Code OK 74136-8443  C  Occupation Managing Partner  Aggregate Year-to-Date ▼  692.28 | Date of Receipt    M                                                                                           |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                         |                                                                                                | 730.76                                                                                                         |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                     | only)                                                                                          |                                                                                                                |

FOR LINE NUMBER: PAGE 29 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Bryan S. Norris Date of Receipt Mailing Address 639 Loyola Avenue **Suite 1900** 2016 31 City State Zip Code Transaction ID: PR151014206 **New Orleans** LA 70113-3188 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Lionel A. Smith Date of Receipt Mailing Address 3922 Patterson Drive 03 31 2016 City State Zip Code Transaction ID: PR151514206 **New Orleans** LA 70114-1809 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Sidney A. Triche Date of Receipt Mailing Address PO Box 159 03 31 2016 City Zip Code State Transaction ID: PR151614206 Larose LA 70373-0159 Amount of Each Receipt this Period FEC ID number of contributing С 91.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.33 Monthly) 257.99 Other (specify) 422.11 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOF  | R LINE           | NU | <b>MBER</b> | : | PAGE | : 3 | 30 ( | OF | 175 |  |
|------------------------------------------------|------|------------------|----|-------------|---|------|-----|------|----|-----|--|
| Use separate schedule(s)                       | (che | (check only one) |    |             |   |      |     |      |    |     |  |
| for each category of the Detailed Summary Page | X    | 11a              |    | 11b         |   | 11c  |     | 12   |    |     |  |
| ,,g.                                           |      | 13               |    | 14          |   | 15   |     | 16   |    | 17  |  |

| or for commercial purposes, other than using                          | nd Statements may not be sold or used by any per g the name and address of any political committee |                                                                  |  |  |
|-----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)  New York Life Insurance Col              | mpany Political Action Committee                                                                   |                                                                  |  |  |
| /                                                                     | mpany i omioai / totion ooniinittee                                                                |                                                                  |  |  |
| Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Daryl R. Ellis  |                                                                                                    | Date of Receipt                                                  |  |  |
| Mailing Address 7918 Settlers Circle                                  |                                                                                                    | M = M / D = D / Y = Y = Y                                        |  |  |
| City                                                                  | State Zip Code                                                                                     | 03 31 2016 Transaction ID : PR152814206                          |  |  |
| Baton Rouge                                                           | LA 70810-2096                                                                                      | Amount of Each Receipt this Period                               |  |  |
| FEC ID number of contributing federal political committee.            | C                                                                                                  | 250.00                                                           |  |  |
| Name of Employer                                                      | Occupation                                                                                         | Memo Item                                                        |  |  |
| New York Life Insurance Company                                       | Agent                                                                                              |                                                                  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                      | Aggregate Year-to-Date ▼ 750.00                                                                    | P/R Deduction (\$250.00 Monthly)                                 |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Christopher J. Prudhomme | ·                                                                                                  | Date of Receipt                                                  |  |  |
| Mailing Address 9 Huntington Court                                    |                                                                                                    | M = M / D = D / Y = Y = Y                                        |  |  |
| City                                                                  | State Zip Code                                                                                     | 03 31 2016<br>Transaction ID : PR153814206                       |  |  |
| Newport Beach                                                         | CA 92660-4217                                                                                      | Amount of Each Receipt this Period                               |  |  |
| FEC ID number of contributing federal political committee.            | С                                                                                                  | 230.76                                                           |  |  |
| Name of Employer                                                      | Occupation                                                                                         | Memo Item                                                        |  |  |
| New York Life Insurance Company                                       | Managing Partner                                                                                   |                                                                  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                      | Aggregate Year-to-Date ▼ 692.28                                                                    | P/R Deduction (\$115.38 Bi-Weekly)                               |  |  |
| Full Name (Last, First, Middle Initial)  C. Mr. Samuel L. Hebert      |                                                                                                    | Date of Receipt                                                  |  |  |
| Mailing Address 3307 Henderson Bayou F                                | Road                                                                                               | 03 31 2016                                                       |  |  |
| City<br>Lake Charles                                                  | State Zip Code<br>LA 70605-2248                                                                    | Transaction ID : PR154014206  Amount of Each Receipt this Period |  |  |
| FEC ID number of contributing federal political committee.            | C                                                                                                  | 125.00                                                           |  |  |
| Name of Employer                                                      | Occupation                                                                                         | - Memo Item                                                      |  |  |
| New York Life Insurance Company                                       | Agent                                                                                              |                                                                  |  |  |
| Receipt For:                                                          | Receipt For: Aggregate Year-to-Date ▼                                                              |                                                                  |  |  |
| Primary General  Other (specify) ▼                                    | 375.00                                                                                             | P/R Deduction (\$125.00 Monthly)                                 |  |  |
| SUBTOTAL of Receipts This Page (optional                              | l) <b>&gt;</b>                                                                                     | 605.76                                                           |  |  |
|                                                                       |                                                                                                    | , , , , , , , , , , , , , , , , , , , ,                          |  |  |
| TOTAL This Period (last page this line num                            | ber only)                                                                                          |                                                                  |  |  |

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                                 | for each category of the<br>Detailed Summary Page                                   | X   11a                                                                                                                                            |
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| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                                                  |                                                                                     |                                                                                                                                                    |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                                                                                                                                                                                                                        | eany Political Action Committee                                                     |                                                                                                                                                    |
| Full Name (Last, First, Middle Initial)  Mr. Gordon D. Ellis Jr.  Mailing Address 11410 Sugar Lane  City  Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)            | State Zip Code LA 70810-2059  C Occupation Agent Aggregate Year-to-Date ▼           | Date of Receipt  03 31 2016  Transaction ID: PR154614206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly)  |
| Full Name (Last, First, Middle Initial)  Mr. Michael T. Delahaye  Mailing Address 7515 Jefferson Highway # 173  City  Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State Zip Code LA 70806-8308  C  Occupation Agent  Aggregate Year-to-Date ▼  458,00 | Date of Receipt  03 31 2016  Transaction ID : PR154714206  Amount of Each Receipt this Period  158.00  Memo Item  P/R Deduction (\$158.00 Monthly) |
| Full Name (Last, First, Middle Initial)  Mr. Michael R. Noland  Mailing Address 5933 S Knoxville Avenue  City Tulsa  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify)                | State Zip Code OK 74135-7806  C  Occupation Agent  Aggregate Year-to-Date ▼  750.00 | Date of Receipt  03 31 2016  Transaction ID: PR156914206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly)  |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                                        | )                                                                                   | 658.00                                                                                                                                             |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                                    | only)                                                                               |                                                                                                                                                    |

|                                                | FO               | R LINE | NU | <b>MBER</b> | : | PAGE | Ξ ; | 32 OF |  | 175 |
|------------------------------------------------|------------------|--------|----|-------------|---|------|-----|-------|--|-----|
| Use separate schedule(s)                       | (check only one) |        |    |             |   |      |     |       |  |     |
| for each category of the Detailed Summary Page | ×                | 11a    |    | 11b         |   | 11c  |     | 12    |  |     |
| _ common common, cage                          |                  | 13     |    | 14          |   | 15   |     | 16    |  | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Fred D. Bangasser Date of Receipt Mailing Address 7400 Crestway Drive Apt. 1220 31 2016 City Zip Code State Transaction ID: PR157914206 TX 78239-3097 San Antonio Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Lawrence J. Bernard Date of Receipt Mailing Address 5100 San Felipe Street Unit 181E 03 31 2016 City State Zip Code Transaction ID: PR158014206 TX 77056-3687 Houston Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Raymond Vitek Jr. Date of Receipt Mailing Address 818 San Marino Street 03 31 2016 City Zip Code State Transaction ID: PR158214206 TX Sugar Land 77478-3328 Amount of Each Receipt this Period FEC ID number of contributing С 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) 249.99 Other (specify) 266.67

SUBTOTAL of Receipts This Page (optional).....

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|                                                   | FOR LINE NUMBER: PAGE 33 OF |    |    |  |  |  |  |  |  |
|---------------------------------------------------|-----------------------------|----|----|--|--|--|--|--|--|
| Use separate schedule(s)                          | (check only one)            |    |    |  |  |  |  |  |  |
| for each category of the<br>Detailed Summary Page | X 11a 11b 11c               | 12 |    |  |  |  |  |  |  |
| ,                                                 | 13 14 15                    | 16 | 17 |  |  |  |  |  |  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Gib Surles Date of Receipt Mailing Address 434 Westminster Drive 31 2016 City State Zip Code Transaction ID: PR160114206 TX Houston 77024-5609 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Thomas H. Ball Date of Receipt Mailing Address 2200 Westlake Drive 03 31 2016 City State Zip Code Transaction ID: PR160814206 TX Austin 78746-2933 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$80.00 Monthly) Other (specify) 240,00 Full Name (Last, First, Middle Initial) c. Mr. Robert McKinley Date of Receipt Mailing Address 243 Maple Valley Road 03 31 2016 City Zip Code State Transaction ID: PR163014206 TX Houston 77056-1009 Amount of Each Receipt this Period FEC ID number of contributing С 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) 560.78 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                       | for each category of the Detailed Summary Page                                                | X   11a                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and sor for commercial purposes, other than using the                                                                                                                                                                                         |                                                                                               |                                                                                                                                                   |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                                                                                                                                                                                                              | pany Political Action Committee                                                               |                                                                                                                                                   |
| Full Name (Last, First, Middle Initial)  Ms. Aurora Saenz  Mailing Address 2002 S Westgate Drive  City  Weslaco                                                                                                                                                                        | Date of Receipt  03 31 2016  Transaction ID : PR164014206  Amount of Each Receipt this Period |                                                                                                                                                   |
| FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify)                                                                                                                          | TX 78596-9310  C  Occupation Agent  Aggregate Year-to-Date ▼  498.00                          | Amount of Each Receipt this Period  166.00  Memo Item  P/R Deduction (\$166.00 Monthly)                                                           |
| Full Name (Last, First, Middle Initial)  Mr. Trenton D. Lewis  Mailing Address 3717 Eck Lane  City  Austin  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)             | State Zip Code TX 78734-1610  C  Occupation Managing Partner  Aggregate Year-to-Date ▼        | Date of Receipt    Mark                                                                                                                           |
| Full Name (Last, First, Middle Initial)  Ms. Karen L. Watson  Mailing Address 3310 Rosemeade Drive Unit  City Fort Worth  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) |                                                                                               | Date of Receipt  03 31 2016  Transaction ID: PR165914206  Amount of Each Receipt this Period  166.67  Memo Item  P/R Deduction (\$166.67 Monthly) |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                              |                                                                                               | 409.61                                                                                                                                            |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                          | only)                                                                                         |                                                                                                                                                   |

FOR LINE NUMBER: PAGE 35 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Elizabeth S. Gonzales Date of Receipt Mailing Address 724 Wales Way 2016 31 City Zip Code State Transaction ID: PR166714206 Austin TX 78748-6531 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 216.68 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Stuart J. Isgur Date of Receipt Mailing Address 777 Main Street Suite 3800 03 31 2016 City State Zip Code Transaction ID: PR167814206 Fort Worth TX 76102-5319 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$125.00 Monthly) Other (specify) 375,00 Full Name (Last, First, Middle Initial) c. Mr. Marcel R. Frey Date of Receipt Mailing Address 1703 S Medio River Circle 03 31 2016 City Zip Code State Transaction ID: PR168214206 TX Sugar Land 77478-5315 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$84.00 Monthly) 252.00 Other (specify) 292.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 36 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Rodger K. Johnson Date of Receipt Mailing Address 910 N Houston Street 2016 31 City State Zip Code Transaction ID: PR168814206 TX Bullard 75757-5128 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Stephen N. Maus Date of Receipt Mailing Address 3505 Turtle Creek Blvd. Apt. 10E 03 31 2016 City State Zip Code Transaction ID: PR170214206 Dallas TX 75219-5569 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Terry K. Lewis Date of Receipt Mailing Address 5612 Dale Avenue 03 31 2016 City Zip Code State Transaction ID: PR173414206 MN Edina 55436-2469 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 37 OF Use separate schedule(s) (check only one)

| I E            | EMIZED RECEIPTS                                                                                                                          |                                        | for each category of the<br>Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17                                                    |
|----------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------|------------------------------------------------------------------------------------|
|                | vinformation copied from such Reports and Stator commercial purposes, other than using the                                               |                                        |                                                   |                                                                                    |
| \              | NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                               | ny Politi                              | cal Action Committee                              |                                                                                    |
| <b>A.</b><br>I | Full Name (Last, First, Middle Initial) Mr. Marlyn Mc Clain  Mailing Address 208 Parkwild Drive  City                                    | State                                  | Zip Code                                          | Date of Receipt  03 31 2016  Transaction ID: PR175414206                           |
| -              | Council Blfs FEC ID number of contributing federal political committee.                                                                  | C                                      | 51503-1759                                        | Amount of Each Receipt this Period 166.67                                          |
| 1              | Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)                                       | Occupation<br>Agent<br>Aggregate       | Year-to-Date ▼ 500.01                             | P/R Deduction (\$166.67 Monthly)                                                   |
| <b>3.</b> _    | Full Name (Last, First, Middle Initial) Mr. Dennis J. Bell Mailing Address 10576 Sunset Terrace                                          |                                        |                                                   | Date of Receipt  03 31 2016                                                        |
| -              | City Clive FEC ID number of contributing federal political committee.                                                                    | State IA                               | Zip Code<br>50325-6554                            | Transaction ID : PR175714206  Amount of Each Receipt this Period  85.00            |
| 1              | Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)                                       | Occupation<br>Agent<br>Aggregate       | Year-to-Date ▼  255.00                            | P/R Deduction (\$85.00 Monthly)                                                    |
| C<br>!         | Full Name (Last, First, Middle Initial)  Mr. Troy G. Braswell  Mailing Address 16843 Highland Ridge Drive                                |                                        |                                                   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                       |
| -<br>I<br>I    | City Village Of Loch Lloyd FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company | State<br>MO  C  Occupation  Managing F |                                                   | Transaction ID: PR179014206  Amount of Each Receipt this Period  230.78  Memo Item |
| -              | Receipt For:  Primary General  Other (specify) ▼                                                                                         | Aggregate                              | Year-to-Date ▼ 692.34                             | P/R Deduction (\$115.39 Bi-Weekly)                                                 |
| SL             | JBTOTAL of Receipts This Page (optional)                                                                                                 |                                        | <b>&gt;</b>                                       | 482.45                                                                             |
| TC             | OTAL This Period (last page this line number of                                                                                          | nly)                                   | <b>&gt;</b>                                       |                                                                                    |

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                       | for each category of the Detailed Summary Page                                                    | X 11a 11b 11c 12<br>13 14 15 16 17                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                                        |                                                                                                   |                                                                                                                                                 |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                             | any Political Action Committee                                                                    |                                                                                                                                                 |
| Full Name (Last, First, Middle Initial)  Mr. Galen D. Dody  Mailing Address 501 David Drive  City Clinton                                                                                                                                                                              | State Zip Code<br>MO 64735-1948                                                                   | Date of Receipt    M                                                                                                                            |
| FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify)                                                                                                                          | Occupation Agent  Aggregate Year-to-Date ▼  750.00                                                | Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly)                                                         |
| Full Name (Last, First, Middle Initial)  Mr. David A. Lyons  Mailing Address 405 Barrett Road  City  Lawrence  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)          | State Zip Code NY 11559-2702  C  Occupation Agent  Aggregate Year-to-Date ▼                       | Date of Receipt  03 31 2016  Transaction ID: PR180414206  Amount of Each Receipt this Period  83.33  Memo Item  P/R Deduction (\$83.33 Monthly) |
| Full Name (Last, First, Middle Initial)  Mr. Joel P. Blanchard  Mailing Address 5608 S Deer Park Drive  City Sioux Falls  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) | State Zip Code SD 57108-2013  C  Occupation Zone Vice President  Aggregate Year-to-Date ▼  692.34 | Date of Receipt  03                                                                                                                             |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                              |                                                                                                   | 564.11                                                                                                                                          |
| TOTAL This Period (last page this line number of                                                                                                                                                                                                                                       | only)                                                                                             |                                                                                                                                                 |

FOR LINE NUMBER: (check only one) PAGE 39 OF 175 Use separate schedule(s)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                        | for each category of the<br>Detailed Summary Page                         | X   11a                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                                         |                                                                           |                                                                                                                                                   |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                                                                                                                                                                                                               | eany Political Action Committee                                           |                                                                                                                                                   |
| Full Name (Last, First, Middle Initial)  Mr. Greg Blanchard  Mailing Address 4720 W 127th Place  City Broomfield  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)        | State Zip Code CO 80020-5737  C Occupation Agent Aggregate Year-to-Date ▼ | Date of Receipt  03 31 2016  Transaction ID : PR182314206  Amount of Each Receipt this Period  83.34  Memo Item  P/R Deduction (\$83.34 Monthly)  |
| Full Name (Last, First, Middle Initial)  Mr. Richard J. Garry  Mailing Address 5710 S Nature Run Place  City  Sioux Falls  FEC ID number of contributing federal political committee.  Name of Employer                                                                                 | State Zip Code SD 57108-5240  C                                           | Date of Receipt  03 31 2016  Transaction ID : PR182914206  Amount of Each Receipt this Period  166.67  Memo Item                                  |
| New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                       | Agent  Aggregate Year-to-Date ▼  500.01                                   | P/R Deduction (\$166.67 Monthly)                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. Steven J. Garry  Mailing Address 2408 W Sleigh Creek Trail  City Sioux Falls  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) | State Zip Code SD 57108-3002  C Occupation Agent Aggregate Year-to-Date ▼ | Date of Receipt  03 31 2016  Transaction ID: PR183014206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly) |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                               |                                                                           | 500.01                                                                                                                                            |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                           | only)                                                                     |                                                                                                                                                   |

FOR LINE NUMBER: PAGE 40 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Kirk G. Quaschnick Date of Receipt Mailing Address 2977 Horseshoe Trail 2016 31 City Zip Code State Transaction ID: PR183114206 TX Frisco 75033-7391 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Andrea V. Burckhard Date of Receipt Mailing Address 320 E Broad Street Suite 1A 03 31 2016 City State Zip Code Transaction ID: PR183264514206 Cookeville TN 38501-3382 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Monthly) Other (specify) 210,00 Full Name (Last, First, Middle Initial) c. Mr. Roger H. Morris Date of Receipt Mailing Address 2101 N Westwood Avenue 03 31 2016 City Zip Code State Transaction ID: PR183914206 CA Santa Ana 92706-1943 Amount of Each Receipt this Period FEC ID number of contributing С 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) 491.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 41 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Joseph D. Kruse Date of Receipt Mailing Address 609 E Saint Andrews Circle 2016 31 City Zip Code State Transaction ID: PR184214206 SD 57049-5133 Dakota Dunes Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Monthly) 425.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael A. Norman Date of Receipt Mailing Address 5977 Blue Hills Court 03 31 2016 City State Zip Code Transaction ID: PR184614206 NV Reno 89502-8708 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 233.34 Full Name (Last, First, Middle Initial) c. Mr. Shane M. Swanson Date of Receipt Mailing Address 123 West Delaware Place 03 31 2016 City State Zip Code Transaction ID: PR185514206 IL Chicago 60610-3216 Amount of Each Receipt this Period FEC ID number of contributing С 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) 464.12 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 42 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Walter C. May Date of Receipt Mailing Address 2009 Royal Club Court 2016 31 City State Zip Code Transaction ID: PR186214206 TX Arlington 76017-4434 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kevin R. Johnson Date of Receipt Mailing Address 4001 W 105th Street Apt. 227 03 31 2016 City State Zip Code Transaction ID: PR188514206 Overland Park KS 66207-4053 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. C. L. Meigs Date of Receipt Mailing Address 20040 Southeast Grandview Avenue 03 31 2016 City State Zip Code Transaction ID: PR188714206 KS Pratt 67124-0000 Amount of Each Receipt this Period FEC ID number of contributing С 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) 258.02 Other (specify) 591.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                      | for each category of the Detailed Summary Page                                             | (check only one)    X   11a                                                                       |
|-------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and or for commercial purposes, other than using the         | Statements may not be sold or used by any pare name and address of any political committee | erson for the purpose of soliciting contributions e to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                             | pany Political Action Committee                                                            |                                                                                                   |
| Full Name (Last, First, Middle Initial)  Mr. John Mc Kenna Jr.  Mailing Address 110 Churn Creek Drive |                                                                                            | Date of Receipt                                                                                   |
| City                                                                                                  | State Zip Code                                                                             | 03 31 2016 Transaction ID : PR189114206                                                           |
| Bozeman                                                                                               | MT 59715-7872                                                                              | Amount of Each Receipt this Period                                                                |
| FEC ID number of contributing federal political committee.                                            | C                                                                                          | 250.00                                                                                            |
| Name of Employer                                                                                      | Occupation                                                                                 | Memo Item                                                                                         |
| New York Life Insurance Company                                                                       | Agent                                                                                      |                                                                                                   |
| Receipt For:  Primary General  Other (specify) ▼                                                      | Aggregate Year-to-Date ▼ 750.00                                                            | P/R Deduction (\$250.00 Monthly)                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. Rakesh R. Bansal                                         |                                                                                            | Date of Receipt                                                                                   |
| Mailing Address 1 Horseshoe Court                                                                     |                                                                                            | 03 31 2016                                                                                        |
| City                                                                                                  | State Zip Code                                                                             | Transaction ID : PR18914206                                                                       |
| Monroe                                                                                                | NJ 08831-2368                                                                              | Amount of Each Receipt this Period                                                                |
| FEC ID number of contributing federal political committee.                                            | C                                                                                          | 250.00                                                                                            |
| Name of Employer<br>New York Life Insurance Company                                                   | Occupation Agent                                                                           | Memo Item                                                                                         |
| Receipt For:  Primary General  Other (specify) ▼                                                      | Aggregate Year-to-Date ▼ 750.00                                                            | P/R Deduction (\$250.00 Monthly)                                                                  |
| Full Name (Last, First, Middle Initial)  C. Mr. David S. Sell                                         |                                                                                            | Date of Receipt                                                                                   |
| Mailing Address 75 Sasapequan Road                                                                    |                                                                                            | 03 31 2016                                                                                        |
| City<br>Fairfield                                                                                     | State Zip Code<br>CT 06824-7205                                                            | Transaction ID : PR189273114206  Amount of Each Receipt this Period                               |
| FEC ID number of contributing federal political committee.                                            | C                                                                                          | 86.00                                                                                             |
| Name of Employer                                                                                      | Occupation                                                                                 | Memo Item                                                                                         |
| New York Life Insurance Company                                                                       | Senior Director                                                                            |                                                                                                   |
| Receipt For:  Primary General  Other (specify) ▼                                                      | Aggregate Year-to-Date ▼  244.41                                                           | P/R Deduction (\$43.00 Bi-Weekly)                                                                 |
| SUBTOTAL of Receipts This Page (optional)                                                             |                                                                                            | 586.00                                                                                            |
| TOTAL This Period (last page this line numbe                                                          |                                                                                            |                                                                                                   |

|                                                | FOF  | R LINE  | NU | MBER | : | PAGE | <br>14 OF | = | 175 |
|------------------------------------------------|------|---------|----|------|---|------|-----------|---|-----|
| Use separate schedule(s)                       | (che | ck only | or | ne)  |   |      |           |   |     |
| for each category of the Detailed Summary Page | ×    | 11a     |    | 11b  |   | 11c  | 12        |   |     |
| ,,g.                                           |      | 13      |    | 14   |   | 15   | 16        |   | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. John P. Schwan Date of Receipt Mailing Address 112 W Perry Lane 31 2016 City Zip Code State Transaction ID: PR189714206 SD Mina 57451-3014 Amount of Each Receipt this Period FEC ID number of contributing 416.66 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$416.66 Monthly) 1249.98 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jeffrey S. Marsh Date of Receipt Mailing Address 1749 W 15th Avenue 03 31 2016 City State Zip Code Transaction ID: PR191714206 WY Torrington 82240-3706 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) Other (specify) 249,99 Full Name (Last, First, Middle Initial) c. Mr. David R. Somerville Jr. Date of Receipt Mailing Address 725 Rosarita Drive 03 31 2016 City State Zip Code Transaction ID: PR192614206 CA Fullerton 92835-1842 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) 249.99 Other (specify) 583.32 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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| TEMIZED RECEIPTS                                                                                      |                        | for each category of the<br>Detailed Summary Page | X 11a 11b 11c 12<br>13 14 15 16 17                                           |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------|------------------------------------------------------------------------------|--|--|--|--|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the       |                        |                                                   |                                                                              |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                            | any Politi             | cal Action Committee                              |                                                                              |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Murray A. Pruetz  Mailing Address 2626 W Walatowa Street | Date of Receipt        |                                                   |                                                                              |  |  |  |  |  |
| City Phoenix                                                                                          | State<br>AZ            | Zip Code<br>85041-9626                            | 03 31 2016<br>Transaction ID : PR193214206                                   |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                            | С                      |                                                   | Amount of Each Receipt this Period  100.00                                   |  |  |  |  |  |
| Name of Employer  New York Life Insurance Company                                                     | Occupation<br>Agent    | 1                                                 | Memo Item                                                                    |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                      | Aggregate              | Year-to-Date ▼ 300.00                             | P/R Deduction (\$100.00 Monthly)                                             |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Joseph L. Tigert  Mailing Address 8620 Brentmoor Street  |                        |                                                   | Date of Receipt                                                              |  |  |  |  |  |
| City<br>Wichita                                                                                       | State<br>KS            | Zip Code<br>67206-2404                            | 03 31 2016  Transaction ID : PR194314206  Amount of Each Receipt this Period |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                            | С                      |                                                   | 230.78                                                                       |  |  |  |  |  |
| Name of Employer New York Life Insurance Company                                                      | Occupation  Managing F |                                                   | Memo Item                                                                    |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                      | Aggregate              | Year-to-Date ▼ 692.34                             | P/R Deduction (\$115.39 Bi-Weekly)                                           |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Ms. Kap S. Enders                                            |                        |                                                   | Date of Receipt                                                              |  |  |  |  |  |
| Mailing Address 10620 Washington Circle  City                                                         | State                  | Zip Code                                          | 03 31 2016                                                                   |  |  |  |  |  |
| Anchorage                                                                                             | AK                     | 99515-2505                                        | Transaction ID : PR195014206  Amount of Each Receipt this Period             |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                            | С                      |                                                   | 100.00                                                                       |  |  |  |  |  |
| Name of Employer  New York Life Insurance Company                                                     | Occupation<br>Agent    | 1                                                 | Memo Item                                                                    |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify)                                                        |                        | Year-to-Date ▼ 300.00                             | P/R Deduction (\$100.00 Monthly)                                             |  |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                             |                        |                                                   | 430.78                                                                       |  |  |  |  |  |
| TOTAL This Period (last page this line number                                                         | only)                  | ·····                                             |                                                                              |  |  |  |  |  |

FOR LINE NUMBER: PAGE 46 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Steven T. Mindak Date of Receipt Mailing Address 8702 E San Martin Drive 2016 31 City Zip Code State Transaction ID: PR195214206 Scottsdale ΑZ 85258-2606 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$175.00 Monthly) 516.67 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Carrie L. Hall Date of Receipt Mailing Address 5628 E Monterosa Street 03 31 2016 City State Zip Code Transaction ID: PR195314206 ΑZ Phoenix 85018-4646 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$300.00 Monthly) Other (specify) 900,00 Full Name (Last, First, Middle Initial) c. Mr. John Glass Date of Receipt Mailing Address 6174 N Paradise View Drive 03 31 2016 Zip Code State Transaction ID: PR195714206 ΑZ Paradise Valley 85253-3816 Amount of Each Receipt this Period FEC ID number of contributing С 150.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Monthly) 450.00 Other (specify) 625.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: (check only one) PAGE 47 OF 175 Use separate schedule(s)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                 | for each category of the<br>Detailed Summary Page                                   | X   11a                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and or for commercial purposes, other than using the                                                                                                                                                                                    |                                                                                     | erson for the purpose of soliciting contributions e to solicit contributions from such committee.                                                 |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                                                                                                                                                                                                        | pany Political Action Committee                                                     |                                                                                                                                                   |
| Full Name (Last, First, Middle Initial)  Mr. Jan Christensen  Mailing Address 2356 E Bear Hills Drive  City Draper  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) | State Zip Code UT 84020-9672  C  Occupation Agent  Aggregate Year-to-Date ▼  750.00 | Date of Receipt  03 31 2016  Transaction ID: PR197114206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly) |
| Full Name (Last, First, Middle Initial)  Mr. Michael J. Wallace  Mailing Address 1654 Wheatgrass Court  City  Reno  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:                                  | State Zip Code NV 89509-6912  C  Occupation Agent  Aggregate Year-to-Date ▼         | Date of Receipt  03 31 2016  Transaction ID: PR198014206  Amount of Each Receipt this Period  100.00  Memo Item                                   |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mr. Robert D. Hall  Mailing Address 2015 Evergreen Court                                                                                                                                             | 283.34                                                                              | P/R Deduction (\$100.00 Monthly)  Date of Receipt  03 31 2016                                                                                     |
| City Yakima  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) ▼                                                                                                      | State Zip Code WA 98902-1200  C  Occupation Agent  Aggregate Year-to-Date ▼  750.00 | Transaction ID: PR198614206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly)                              |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                        |                                                                                     | 600.00                                                                                                                                            |
| TOTAL This Period (last page this line numbe                                                                                                                                                                                                                                     | r only)                                                                             |                                                                                                                                                   |

FOR LINE NUMBER: PAGE 48 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Dennis B. Call Date of Receipt Mailing Address 2612 Ashwood Lane 2016 31 City Zip Code State Transaction ID: PR199214206 Bedford TX 76021-2622 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Rick G. Austin Date of Receipt Mailing Address 6509 Claret Court 03 31 2016 City State Zip Code Transaction ID: PR199414206 MO Parkville 64152-6084 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Robert L. Cannon III Date of Receipt Mailing Address 30700 19th Avenue S 03 31 2016 City Zip Code State Transaction ID: PR203914206 WA Federal Way 98003-5103 Amount of Each Receipt this Period FEC ID number of contributing С 150.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Monthly) 450.00 Other (specify) 483.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                   | for each category of the<br>Detailed Summary Page                           | X   11a                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and Sta or for commercial purposes, other than using the                                                                                                                                                                                  |                                                                             |                                                                                                                                                  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                         | any Political Action Committee                                              |                                                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. Yoshio Kinjo  Mailing Address 241 S Peralta Hills Drive  City Anaheim  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State Zip Code CA 92807-3425  C  Occupation Agent  Aggregate Year-to-Date ▼ | Date of Receipt  03 31 2016  Transaction ID : PR206014206  Amount of Each Receipt this Period  83.33  Memo Item  P/R Deduction (\$83.33 Monthly) |
| Full Name (Last, First, Middle Initial)  3. Ms. Barbara L. Cole  Mailing Address 3531 E Baron Court                                                                                                                                                                                |                                                                             | Date of Receipt  03 31 2016                                                                                                                      |
| City Orange  FEC ID number of contributing federal political committee.                                                                                                                                                                                                            | State Zip Code<br>CA 92869-2584                                             | Transaction ID : PR206114206  Amount of Each Receipt this Period  83.33                                                                          |
| Name of Employer New York Life Insurance Company Receipt For:                                                                                                                                                                                                                      | Occupation<br>Agent                                                         | Memo Item                                                                                                                                        |
| Primary General  Other (specify) ▼                                                                                                                                                                                                                                                 | Aggregate Year-to-Date ▼  249.99                                            | P/R Deduction (\$83.33 Monthly)                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Ms. Katherine H. Huebert  Mailing Address 294 Robinwood Circle                                                                                                                                                                            |                                                                             | Date of Receipt  03 31 2016                                                                                                                      |
| City                                                                                                                                                                                                                                                                               | State Zip Code<br>CA 93654-2767                                             | Transaction ID : PR207014206                                                                                                                     |
| Reedley  FEC ID number of contributing federal political committee.  Name of Employer                                                                                                                                                                                              | CA 93654-2767  C Occupation                                                 | Amount of Each Receipt this Period  83.33  Memo Item                                                                                             |
| New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                  | Aggregate Year-to-Date ▼  249.99                                            | P/R Deduction (\$83.33 Monthly)                                                                                                                  |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                          |                                                                             | 249.99                                                                                                                                           |
| TOTAL This Period (last page this line number o                                                                                                                                                                                                                                    | only)                                                                       |                                                                                                                                                  |

|                                                | FOR  | R LINE   | NU    | MBER | : | PAGE | 50 O | F | 175 |
|------------------------------------------------|------|----------|-------|------|---|------|------|---|-----|
| Use separate schedule(s)                       | (che | eck only | or or | ne)  |   |      |      |   |     |
| for each category of the Detailed Summary Page | X    | 11a      |       | 11b  |   | 11c  | 12   |   |     |
|                                                |      | 13       |       | 14   |   | 15   | 16   |   | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. William V. Brody Date of Receipt Mailing Address 19 Corte Miguel 31 2016 City State Zip Code Transaction ID: PR207814206 94903-1810 CA San Rafael Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Stan Goodin Date of Receipt Mailing Address 6117 Carriage House Way 03 31 2016 City State Zip Code Transaction ID: PR208214206 NV 89519-7324 Reno Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼

| Full Name (Last, First, Middle Initial)  C. Ms. Christie S. Mueller |                                 | Date of Receipt                    |
|---------------------------------------------------------------------|---------------------------------|------------------------------------|
| Mailing Address 6841 Ripley Lane North                              |                                 | 03 31 _ 2016 _                     |
| City                                                                | State Zip Code                  | Transaction ID : PR209914206       |
| Renton                                                              | WA 98056-0000                   | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.          | С                               | 100.00                             |
| Name of Employer                                                    | Occupation                      | Memo Item                          |
| New York Life Insurance Company                                     | Agent                           |                                    |
| Receipt For:  Primary General  Other (specify) ▼                    | Aggregate Year-to-Date ▼ 300.00 | P/R Deduction (\$100.00 Monthly)   |

300.00

Primary

Other (specify)

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

P/R Deduction (\$100.00 Monthly)

FOR LINE NUMBER: PAGE 51 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Louis L. Murray Jr. Date of Receipt Mailing Address 186 Beach Street 2016 31 City Zip Code State Transaction ID: PR2114414206 Quincy MA 02170-2312 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John P. Mosley Date of Receipt Mailing Address 112 Mechanic Street 03 31 2016 City State Zip Code Transaction ID: PR2114614206 Westbrook ME 04092-2843 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Ms. Deborah Lewis Date of Receipt Mailing Address 4280 Country Squire Lane 03 31 2016 City Zip Code State Transaction ID: PR2117314206 Fairfax VA 22032-1610 Amount of Each Receipt this Period FEC ID number of contributing С 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) 433.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 52 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Everton M. Lewis Date of Receipt Mailing Address 774 Bartholdi Street 2016 31 City Zip Code State Transaction ID: PR2117514206 NY Bronx 10467-6208 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John A. Forte Date of Receipt Mailing Address 1 Chandler Drive 03 31 2016 City State Zip Code Transaction ID: PR2119214206 **Ballston Lake** NY 12019-1335 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$125.00 Monthly) Other (specify) 375,00 Full Name (Last, First, Middle Initial) **c.** Mr. David P. Brown Date of Receipt Mailing Address 524 Terrace Avenue 03 31 2016 City Zip Code State Transaction ID: PR2119414206 NY Garden City 11530-5442 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 283.34 Other (specify) 475.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 53 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Otto A. Kuehne Date of Receipt Mailing Address 6213 Ranch View Dr. N 2016 31 City Zip Code State Transaction ID: PR2119914206 NY East Amherst 14051-2094 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Ronnie D. Weller Date of Receipt Mailing Address 723 Whig Hill Road 03 31 2016 City State Zip Code Transaction ID: PR2121314206 PA **Tionesta** 16353-8046 Amount of Each Receipt this Period FEC ID number of contributing 174.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$174.67 Monthly) Other (specify) 508.01 Full Name (Last, First, Middle Initial) c. Mr. John E. Horstmann Date of Receipt Mailing Address 7684 N Kincaid Avenue 03 31 2016 City Zip Code State Transaction ID: PR212214206 CA Fresno 93711-0363 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 374.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 54 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Todd Olig Date of Receipt Mailing Address 1006 Dewey Street 2016 31 City Zip Code State Transaction ID: PR2127314206 WI Kiel 53042-1242 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Oscar A. Anzaldo Date of Receipt Mailing Address 2704 Bonniebrook Drive 03 31 2016 City State Zip Code Transaction ID: PR212814206 CA 95207-1308 Stockton Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Joseph W. Littlejohn Date of Receipt Mailing Address 111 Robert E Lee Place 03 31 2016 Zip Code City State Transaction ID: PR2129514206 LA **Bossier City** 71111-5025 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 55 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Sharon C. Patterson Date of Receipt Mailing Address 1501 Presto Way Northwest 2016 31 City Zip Code State Transaction ID: PR2130714206 NM Albuquerque 87104-2396 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jerry M. Fish Date of Receipt Mailing Address 6300 Wilshire Boulevard Suite 2200 03 31 2016 City State Zip Code Transaction ID: PR213114206 CA Los Angeles 90048-5282 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34 Full Name (Last, First, Middle Initial) c. Mr. Mark A. Wiskus Date of Receipt Mailing Address 1005 Edgewater Drive 03 31 2016 City State Zip Code Transaction ID: PR2133414206 IΑ Pella 50219-7669 Amount of Each Receipt this Period FEC ID number of contributing С 110.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$110.00 Monthly) 310.00 Other (specify) 424.12 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 56 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Michael R. Brown Date of Receipt Mailing Address 8976 Northeast Patton Road 2016 31 City Zip Code State Transaction ID: PR2134114206 MO Hamilton 64644-9166 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael D. Bookout Date of Receipt Mailing Address 12109 South Encampment Circle 03 31 2016 City State Zip Code Transaction ID: PR2134914206 UT Draper 84020-8236 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34 Full Name (Last, First, Middle Initial) c. Mr. E. Jay Bond Date of Receipt Mailing Address 6670 E Green Lake Way N 03 31 2016 City Zip Code State Transaction ID: PR2135714206 WA Seattle 98103-5419 Amount of Each Receipt this Period FEC ID number of contributing С 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) 647.45 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 57 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Richard J. Werner Date of Receipt Mailing Address 2154 Crespi Lane 2016 31 City Zip Code State Transaction ID: PR213614206 CA Westlake Village 91361-1722 Amount of Each Receipt this Period FEC ID number of contributing 174.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$174.67 Monthly) 516.01 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joe Hong Date of Receipt Mailing Address 19 Cedar Lane 03 31 2016 City State Zip Code Transaction ID: PR2136714206 CA San Jose 95127-2313 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) **c.** Mr. Eric K. Takao Date of Receipt Mailing Address 752 Pahumele Place 03 31 2016 City State Zip Code Transaction ID: PR2138614206 HI Kailua 96734-3513 Amount of Each Receipt this Period FEC ID number of contributing С 416.66 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$416.66 Monthly) 1249.98 Other (specify) 691.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 58 OF 175 Use separate schedule(s) (check only one) X 11a 11b 12 11c 14 13 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Angelo Haddad Date of Receipt Mailing Address 1816 Embarcadero Lane 2016 31 City Zip Code State Transaction ID: PR214514206 CA Bakersfield 93311-3151 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Patrick D. Miller Date of Receipt Mailing Address 2703 Starpine Drive 03 31 2016 City State Zip Code Transaction ID: PR214714206 CA Duarte 91010-1314 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Kevin Choi Date of Receipt Mailing Address 1160 Mission Street 03 31 2016 #1201 City State Zip Code Transaction ID: PR2153114206 CA San Francisco 94103-1578 Amount of Each Receipt this Period FEC ID number of contributing С 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) 580.78 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                               | for each category of the Detailed Summary Page                        | X   11a                                                                  |
|----------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------------------------------|
| Any information copied from such Reports and Sta<br>or for commercial purposes, other than using the r         |                                                                       |                                                                          |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                     | ny Political Action Committee                                         |                                                                          |
| Full Name (Last, First, Middle Initial)  Mr. Richard K. Stivers  Mailing Address 425 Cove Tower Drive Apt. 120 | 4                                                                     | Date of Receipt  03 31 2016                                              |
| City Naples FEC ID number of contributing                                                                      | State Zip Code<br>FL 34110-6507                                       | Transaction ID : PR215414206  Amount of Each Receipt this Period  250.00 |
| Name of Employer  New York Life Insurance Company  Receipt For:                                                | Occupation Agent Aggregate Year-to-Date ▼                             | Memo Item                                                                |
| Primary General  Other (specify) ▼                                                                             | 750.00                                                                | P/R Deduction (\$250.00 Monthly)                                         |
| Full Name (Last, First, Middle Initial)  Mr. Raymond J. Triplett  Mailing Address 16171 Hillvale Avenue        |                                                                       | Date of Receipt  03 31 2016                                              |
| City<br>Monte Sereno                                                                                           | State Zip Code<br>CA 95030-4159                                       | Transaction ID : PR217214206  Amount of Each Receipt this Period         |
| FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  | Occupation                                                            | 250.00 Memo Item                                                         |
| Receipt For:  Primary  Other (specify) ▼                                                                       | Agent Aggregate Year-to-Date ▼  750.00                                | P/R Deduction (\$250.00 Monthly)                                         |
| Full Name (Last, First, Middle Initial)  C. Mr. Michael R. Grinnon                                             |                                                                       | Date of Receipt                                                          |
| Mailing Address 6900 Bishop Road  #4220 City                                                                   | State Zip Code                                                        | 03 31 2016<br>Transaction ID : PR218672214206                            |
| Plano FEC ID number of contributing federal political committee.                                               | TX 75024-4577                                                         | Amount of Each Receipt this Period  230.76                               |
| Name of Employer  New York Life Insurance Company  Receipt For:  □ Primary □ General  Other (specify) ▼        | Occupation Corporate Vice President  Aggregate Year-to-Date ▼  692.28 | P/R Deduction (\$115.38 Bi-Weekly)                                       |
| SUBTOTAL of Receipts This Page (optional)                                                                      |                                                                       | 730.76                                                                   |
| TOTAL This Period (last page this line number or                                                               |                                                                       |                                                                          |

FOR LINE NUMBER: PAGE 60 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Nick Ameli Jr. Date of Receipt Mailing Address 4113 Coal Heritage Road 2016 31 City Zip Code State Transaction ID: PR2188114206 WV Bluewell 24701-9193 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) 249.99 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jerome Timmerman Date of Receipt Mailing Address 64 Windsor Lane 03 31 2016 City State Zip Code Transaction ID: PR2188514206 IL **Breese** 62230-3512 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Bryan T. Buzzard Date of Receipt Mailing Address 3311 E Dartmouth Street 03 31 2016 City Zip Code State Transaction ID: PR2189214206 ΑZ Mesa 85213-7046 Amount of Each Receipt this Period FEC ID number of contributing С 80.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$80.00 Monthly) 240.00 Other (specify) 413.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: (check only one) PAGE 61 OF 175 Use separate schedule(s)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                             | for each category of the<br>Detailed Summary Page                                   | X   11a                                                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and St or for commercial purposes, other than using the                                                                                                                                                                             |                                                                                     |                                                                                                                                                    |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                   | any Political Action Committee                                                      |                                                                                                                                                    |
| Full Name (Last, First, Middle Initial) Mr. David L. Aguirre  Mailing Address 7518 South 240 E  City Midvale  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State Zip Code UT 84047-2169  C Occupation Agent Aggregate Year-to-Date ▼           | Date of Receipt  03 31 2016  Transaction ID: PR2189314206  Amount of Each Receipt this Period  100.00  Memo Item  P/R Deduction (\$100.00 Monthly) |
| Full Name (Last, First, Middle Initial)  Mr. Richard R. Paulsen  Mailing Address 6280 Crooked Stick Circle                                                                                                                                                                   |                                                                                     | Date of Receipt                                                                                                                                    |
| City Stockton  FEC ID number of contributing federal political committee.                                                                                                                                                                                                    | State Zip Code<br>CA 95219-1859                                                     | Transaction ID : PR222514206  Amount of Each Receipt this Period  250.00                                                                           |
| Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                          | Occupation Agent  Aggregate Year-to-Date ▼  750.00                                  | P/R Deduction (\$250.00 Monthly)                                                                                                                   |
| Full Name (Last, First, Middle Initial)  Mr. Mitch Rosenberg  Mailing Address 870 Camino El Carrizo                                                                                                                                                                          |                                                                                     | Date of Receipt  03 31 2016                                                                                                                        |
| City Thousand Oaks  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify)                                                                                            | State Zip Code CA 91360-2324  C  Occupation Agent  Aggregate Year-to-Date ▼  250.02 | Transaction ID : PR223614206  Amount of Each Receipt this Period  83.34  Memo Item  P/R Deduction (\$83.34 Monthly)                                |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                    |                                                                                     | 433.34                                                                                                                                             |
| TOTAL This Period (last page this line number of                                                                                                                                                                                                                             | only)                                                                               |                                                                                                                                                    |

FOR LINE NUMBER: PAGE 62 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Scott V. Spickler Date of Receipt Mailing Address 10754 Horizon Drive 2016 31 City State Zip Code Transaction ID: PR225914206 Juneau ΑK 99801-7625 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Monthly) 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Curtis L. Urling Date of Receipt Mailing Address 155 Botanical Circle 03 31 2016 City State Zip Code Transaction ID: PR226114206 ΑK Anchorage 99515-3680 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Jack L. Doverspike Date of Receipt Mailing Address PO Box 159 03 31 2016 City Zip Code State Transaction ID: PR228714206 Larose LA 70373-0159 Amount of Each Receipt this Period FEC ID number of contributing С 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) 258.02 Other (specify) 249.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                                            |                                                  | for each category of the<br>Detailed Summary Page       | X 11a 11b 11c 12<br>13 14 15 16 17                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and State or for commercial purposes, other than using the                                                                                                                                                                                                         |                                                  |                                                         |                                                                                                                                                     |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                                                  | ny Politica                                      | al Action Committee                                     | ı                                                                                                                                                   |
| Full Name (Last, First, Middle Initial)  Mr. Jonathan R. Jaramillo  Mailing Address 10400 Northeast 2nd Street  Unit # 501S  City  Bellevue  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State WA  C Occupation Managing Par Aggregate Ye | Zip Code<br>98004-2326<br>rtner<br>ear-to-Date ▼ 692.34 | Date of Receipt  03 31 2016  Transaction ID: PR229014206  Amount of Each Receipt this Period  230.78  Memo Item  P/R Deduction (\$115.39 Bi-Weekly) |
| Full Name (Last, First, Middle Initial)  Mr. Earl S. Prolman  Mailing Address 45 Wood Street  City  Nashua  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)                                  | State NH C Occupation Agent Aggregate Ye         | Zip Code<br>03064-1929<br>ear-to-Date ▼<br>750.00       | Date of Receipt  03 31 2016  Transaction ID: PR2314206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly)     |
| Full Name (Last, First, Middle Initial)  Mr. Charles J. Altmann  Mailing Address 1829 Barry Avenue  City  Los Angeles  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify)                       | State CA  C  Occupation Agent  Aggregate Ye      | Zip Code<br>90025-5306                                  | Date of Receipt  03 31 2016  Transaction ID : PR232114206  Amount of Each Receipt this Period  70.00  Memo Item  P/R Deduction (\$70.00 Monthly)    |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                                                   |                                                  |                                                         | 550.78                                                                                                                                              |
| TOTAL This Period (last page this line number o                                                                                                                                                                                                                                                             | only)                                            |                                                         | •                                                                                                                                                   |

FOR LINE NUMBER: PAGE 64 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                                                                                                                                    |                                                              | for each category of the<br>Detailed Summary Page | X 11a 11b 11c 12<br>13 14 15 16 17                                                        |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------------------------------------------------|--|--|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the                                                                       |                                                              |                                                   |                                                                                           |  |  |  |  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                                                                                           | pany Politi                                                  | cal Action Committee                              |                                                                                           |  |  |  |  |
| Full Name (Last, First, Middle Initial) Mr. Thomas J. Miller Mailing Address 6068 Ironwood Drive  City                                                              | Date of Receipt  03 31 2016  Transaction ID : PR238096614206 |                                                   |                                                                                           |  |  |  |  |
| Billings  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General             | Occupation Managing F Aggregate                              | Partner<br>Year-to-Date ▼                         | Amount of Each Receipt this Period  230.78  Memo Item  P/R Deduction (\$115.39 Bi-Weekly) |  |  |  |  |
| Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mr. John M. Rivera  Mailing Address 6706 E Magill Street                                                | ull Name (Last, First, Middle Initial)<br>Mr. John M. Rivera |                                                   |                                                                                           |  |  |  |  |
| City Wichita  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company                                          | State KS  C Occupation Agent                                 | Zip Code<br>67206-1346                            | Transaction ID : PR238097514206  Amount of Each Receipt this Period  83.34  Memo Item     |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                    | Aggregate                                                    | Year-to-Date ▼ 216.68                             | P/R Deduction (\$83.34 Monthly)                                                           |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Dirk Welzien  Mailing Address 26 Sassafras  City San Ramon                                                             | State<br>CA                                                  | Zip Code<br>94582-5574                            | Date of Receipt    M M M                                                                  |  |  |  |  |
| FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  □ Primary □ General  Other (specify) ▼ | Occupation<br>Agent<br>Aggregate                             |                                                   | Memo Item  P/R Deduction (\$83.34 Monthly)                                                |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                           |                                                              | <b>&gt;</b>                                       | 397.46                                                                                    |  |  |  |  |
| TOTAL This Period (last page this line number                                                                                                                       | r only)                                                      |                                                   |                                                                                           |  |  |  |  |

FOR LINE NUMBER: PAGE 65 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Yosuke Kameoka Date of Receipt Mailing Address 17 Vashon Key 2016 31 City Zip Code State Transaction ID: PR240582514206 WA 98006-1029 Bellevue Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Memo Item Name of Employer Occupation Senior Partner New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 230.76 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jason C. Vanderstreet Date of Receipt Mailing Address 53 Morse Avenue 03 31 2016 City State Zip Code Transaction ID: PR243502914206 Dedham MA 02026-3123 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Ms. Penny K. Righthand Date of Receipt Mailing Address 565 Bellevue Avenue Apt. 1002 03 31 2016 Zip Code City State Transaction ID: PR27514206 CA Oakland 94610-5038 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 410.26 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 66 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Walden J. Rooney Date of Receipt Mailing Address 5 Mountain View Boulevard 2016 31 City Zip Code State Transaction ID: PR2814206 South Burlington VT 05403-5825 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Monthly) 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John Y. Kim Date of Receipt Mailing Address 23 E 22nd Street Unit 24A 03 31 2016 City State Zip Code Transaction ID: PR282425614206 NY New York 10010-5304 Amount of Each Receipt this Period FEC ID number of contributing 104.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company President & Chief Investment Officer Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$52.00 Bi-Weekly) Other (specify) 296,00 Full Name (Last, First, Middle Initial) c. Mr. Kerry J. Loudenslager Date of Receipt Mailing Address 15700 James Thomas Court 03 31 2016 Zip Code City State Transaction ID: PR284037814206 OK Edmond 73013-9735 Amount of Each Receipt this Period FEC ID number of contributing С 84.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.47 Bi-Weekly) 238.82 Other (specify) 263.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 67 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. William R. McCloe Date of Receipt Mailing Address 1001 North Natchez Road Villa F4 2016 31 City Zip Code State Transaction ID: PR285420114206 TN 37405-2251 Chattanooga Amount of Each Receipt this Period FEC ID number of contributing 230.76 federal political committee. Memo Item Name of Employer Occupation Senior Partner New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.38 Bi-Weekly) 692.28 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Jenny O. Kho Date of Receipt Mailing Address 77 Cumberland Drive 03 31 2016 City State Zip Code Transaction ID: PR29114206 NY Yonkers 10704-3525 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Michael G. Fisher Date of Receipt Mailing Address 3805 105th Street 03 31 2016 City Zip Code State Transaction ID: PR292943914206 TX Lubbock 79423-8102 Amount of Each Receipt this Period FEC ID number of contributing С 230.76 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.38 Bi-Weekly) 692.28 Other (specify) 711.52 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 68 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Kimberly E. Fisher Date of Receipt Mailing Address 10 Dekalb Avenue Apt. 505 2016 31 City Zip Code State Transaction ID: PR292946714206 NY White Plains 10605-6452 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 230.76 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joel A. Shapiro Date of Receipt Mailing Address 200 E 66th Street Apt. D302 03 31 2016 City State Zip Code Transaction ID: PR29314206 NY New York 10065-9188 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 266,66 Full Name (Last, First, Middle Initial) c. Mr. Samuel S. Goodyear Date of Receipt Mailing Address 1965 Terracina Circle 03 31 2016 City Zip Code State Transaction ID: PR296756814206 CA Roseville 95747-5060 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 426.92 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 69 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Gabriel L. Gould Date of Receipt Mailing Address 29 Emm Lane 2016 31 City Zip Code State Transaction ID: PR300186314206 NY Roslyn 11576-2005 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Erica T. Berning Date of Receipt Mailing Address 520 North Kingsbury Unit 908 03 31 2016 City State Zip Code Transaction ID: PR302151714206 IL Chicago 60654-8768 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) Other (specify) 230.76 Full Name (Last, First, Middle Initial) c. Mr. Michael M. Oleske Date of Receipt Mailing Address 59 the Neck 03 31 2016 City Zip Code State Transaction ID: PR30814206 NY Manhasset 11030-1315 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Svp, Deputy GC & Chief Tax Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) 300.00 Other (specify) 253.86 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 70 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Michelle R. Albright Date of Receipt Mailing Address 2006 Sea Palms Drive West 2016 31 City Zip Code State Transaction ID: PR316092014206 St. Simons Island GA 31522-5294 Amount of Each Receipt this Period FEC ID number of contributing 208.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.00 Monthly) 616.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Robert Bonk Date of Receipt Mailing Address 4011 S 31st Street 03 31 2016 City State Zip Code Transaction ID: PR340956114206 NE Lincoln 68502-5915 Amount of Each Receipt this Period FEC ID number of contributing 108.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$54.00 Bi-Weekly) Other (specify) 308,00 Full Name (Last, First, Middle Initial) **c.** Mr. Thomas Tyler Date of Receipt Mailing Address 3 High Oak Court 03 31 2016 City Zip Code State Transaction ID: PR342593014206 NY Huntington 11743-4208 Amount of Each Receipt this Period FEC ID number of contributing С 90.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$90.00 Monthly) 240.00 Other (specify) 406.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 71 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Jesus Pineda Date of Receipt Mailing Address 21984 N 104th Lane 2016 31 City Zip Code State Transaction ID: PR343433614206 Peoria ΑZ 85383-2674 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Jeanmarie Holm Date of Receipt Mailing Address 4325 Cobblers Circle 03 31 2016 City State Zip Code Transaction ID: PR344564814206 Dallas TX 75287-6700 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Thomas Kelly Date of Receipt Mailing Address 76 Eastview Drive 03 31 2016 City Zip Code State Transaction ID: PR350255014206 NY Valhalla 10595-1009 Amount of Each Receipt this Period FEC ID number of contributing С 76.92 federal political committee. Memo Item Name of Employer Occupation Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 230.76 Other (specify) 260.26 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

|                                                   | FOR LINE NUMBER: |                  |  |     | PAGE | . 7 | 72 0 | F  | 175 |    |
|---------------------------------------------------|------------------|------------------|--|-----|------|-----|------|----|-----|----|
| Use separate schedule(s)                          | (che             | (check only one) |  |     |      |     |      |    |     |    |
| for each category of the<br>Detailed Summary Page | ×                | 11a              |  | 11b |      | 11c |      | 12 |     |    |
|                                                   |                  | 13               |  | 14  |      | 15  |      | 16 |     | 17 |

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Gerard A. Rocchi Date of Receipt Mailing Address 285 Drive South Broadway 2016 31 City Zip Code State Transaction ID: PR35114206 NY Tarrytown 10591-5338 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation Senior Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Moshe Lebovits Date of Receipt Mailing Address 6 Israel Zupnick Drive Unit 201 03 31 2016 City State Zip Code Transaction ID: PR35314206 NY Monroe 10950-8473 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Ms. Xinfang Wang Date of Receipt Mailing Address 160 E 89th Street Apt. 5F 03 31 2016 City Zip Code State Transaction ID: PR355598714206 NY New York 10128-2307 Amount of Each Receipt this Period FEC ID number of contributing С 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

P/R Deduction (\$91.34 Monthly)

258.02

Primary

Other (specify)

General

FOR LINE NUMBER: PAGE 73 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Brett J. Dries Date of Receipt Mailing Address 25 Calthrop Drive 2016 31 City Zip Code State Transaction ID: PR357658714206 Bridgewater MA 02324-2892 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Senior Partner New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Benjamin B. Yin Date of Receipt Mailing Address 5012 Audley Lane 03 31 2016 City State Zip Code Transaction ID: PR366451214206 GA **Peachtree Corners** 30092-1787 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Mr. Joshua A. Gettler Date of Receipt Mailing Address 15047 Glenmoore Circle 03 31 2016 City Zip Code State Transaction ID: PR366492214206 IN Carmel 46033-6608 Amount of Each Receipt this Period FEC ID number of contributing С 76.92 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 230.76 Other (specify) 426.92 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                   | FC  | DR | LINE    | NU | MBER | : | PAGE | 74 | OF | 175 |
|---------------------------------------------------|-----|----|---------|----|------|---|------|----|----|-----|
| Use separate schedule(s) for each category of the | (cl | he | ck only | or | ne)  |   |      |    |    |     |
| Detailed Summary Page                             |     | X  | 11a     |    | 11b  |   | 11c  | 12 | _  |     |
| ,                                                 |     |    | 13      |    | 14   |   | 15   | 16 |    | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Alphonso Brady Date of Receipt Mailing Address 1644 Bass Road Apt. 915 2016 31 City State Zip Code Transaction ID: PR371506214206 GA Macon 31210-6516 Amount of Each Receipt this Period FEC ID number of contributing 84.92 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.46 Bi-Weekly) 238.76 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David J. Castellani Date of Receipt Mailing Address 29 Indian Mill Road 03 31 2016 City State Zip Code Transaction ID: PR372176614206 Cos Cob CT 06807-1315 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82 Full Name (Last, First, Middle Initial) c. Mr. Jacob M. Godwin Date of Receipt Mailing Address 5511 Vista Way 03 31 2016 City Zip Code State Transaction ID: PR372186914206 WY Casper 82601-6908 Amount of Each Receipt this Period FEC ID number of contributing С 115.38 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$57.69 Bi-Weekly) 346.14 Other (specify) 277.24 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 75 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                              | for each category of the Detailed Summary Page                                               | X   11a                                                                                                                                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                               |                                                                                              |                                                                                                                                                      |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp.                                                                                                                                                                                                                    | any Political Action Committee                                                               |                                                                                                                                                      |
| Full Name (Last, First, Middle Initial)  Ms. Lily Ku  Mailing Address 7021 175th Street  City Fresh Meadows  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company Receipt For:  Primary General Other (specify)       | State Zip Code NY 11365-3416  C  Occupation Senior Partner  Aggregate Year-to-Date ▼  230.76 | Date of Receipt  03 31 2016  Transaction ID: PR375277214206  Amount of Each Receipt this Period  76.92  Memo Item  P/R Deduction (\$38.46 Bi-Weekly) |
| Full Name (Last, First, Middle Initial)  Mr. Salvatore F. Farina  Mailing Address Pobox 770487  City Ocala  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company  Receipt For:  Primary General                       | State Zip Code FL 34477-0487  C  Occupation Senior Vice President  Aggregate Year-to-Date ▼  | Date of Receipt  03 31 2016  Transaction ID: PR38514206  Amount of Each Receipt this Period  230.78  Memo Item  P/R Deduction (\$115.39 Bi-Weekly)   |
| Full Name (Last, First, Middle Initial)  Mr. Piero V. Silvestri  Mailing Address 808 Preston Road  City  East Meadow  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  Other (specify) ▼ | State Zip Code NY 11554-4530  C  Occupation Agent  Aggregate Year-to-Date   600.00           | Date of Receipt  03 31 2016  Transaction ID: PR40014206  Amount of Each Receipt this Period  100.00  Memo Item  P/R Deduction (\$100.00 Monthly)     |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                     |                                                                                              | 407.70                                                                                                                                               |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                 | only)                                                                                        |                                                                                                                                                      |

FOR LINE NUMBER: PAGE 76 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                      |                                                                                              | for each category of the<br>Detailed Summary Page | X   11a                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and St or for commercial purposes, other than using the                                                                                                                                                                                      |                                                                                              |                                                   |                                                                                                                                                                                 |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                            |                                                                                              |                                                   |                                                                                                                                                                                 |
| Full Name (Last, First, Middle Initial)  Ms. Alison J. Flaum  Mailing Address PO Box 12108  City  Austin  FEC ID number of contributing                                                                                                                                               | Date of Receipt  03 31 2016  Transaction ID : PR40914206  Amount of Each Receipt this Period |                                                   |                                                                                                                                                                                 |
| federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify)                                                                                                                                                       | Occupation<br>Agent<br>Aggregate                                                             | Year-to-Date ▼  750.00                            | P/R Deduction (\$250.00 Monthly)                                                                                                                                                |
| Full Name (Last, First, Middle Initial)  Ms. Kathleen A. Donnelly  Mailing Address 47 Southview Circle  City  Lake Grove  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company                                               | State NY  C Occupation Vice Preside                                                          |                                                   | Date of Receipt  03 31 2016  Transaction ID: PR41014206  Amount of Each Receipt this Period  230.78  Memo Item                                                                  |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                                                      | Aggregate                                                                                    | Year-to-Date ▼<br>646.17                          | P/R Deduction (\$115.39 Bi-Weekly)                                                                                                                                              |
| Full Name (Last, First, Middle Initial)  Mr. Jeffrey Killian  Mailing Address 2730 Sir Castor Court  City  Lewisville  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State TX  C Occupation Vice Preside Aggregate                                                |                                                   | Date of Receipt    March   2016   2016     Transaction ID : PR416071614206     Amount of Each Receipt this Period     76.94     Memo Item     P/R Deduction (\$38.47 Bi-Weekly) |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                             |                                                                                              | <b>&gt;</b>                                       | 557.72                                                                                                                                                                          |
| TOTAL This Period (last page this line number of                                                                                                                                                                                                                                      | only)                                                                                        | ·····                                             |                                                                                                                                                                                 |

FOR LINE NUMBER: PAGE 77 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. James N. Glynn Date of Receipt Mailing Address 9301 S Hoyne Avenue 2016 31 City State Zip Code Transaction ID: PR4380314206 Chicago IL 60643-6306 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Craig A. Forman Date of Receipt Mailing Address 5020 W 18th Avenue 03 31 2016 City State Zip Code Transaction ID: PR4486614206 WA Kennewick 99338-1847 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Richard P. Simonetti Date of Receipt Mailing Address 24 Red Oak Lane 03 31 2016 City Zip Code State Transaction ID: PR4486814206 NY Cortlandt Manor 10567-6139 Amount of Each Receipt this Period FEC ID number of contributing С 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) 430.78 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOF  | LINE    | NU    | MBER | : | PAGE | 78 OF | : | 175 |
|------------------------------------------------|------|---------|-------|------|---|------|-------|---|-----|
| Use separate schedule(s)                       | (che | ck only | or or | ne)  |   |      |       |   |     |
| for each category of the Detailed Summary Page | X    | 11a     |       | 11b  |   | 11c  | 12    |   |     |
| zotanou oummary r ago                          |      | 13      |       | 14   |   | 15   | 16    |   | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Darin Fass Date of Receipt Mailing Address 20 Latour Manor 2016 31 City State Zip Code Transaction ID: PR4487314206 NY Fairport 14450-4637 Amount of Each Receipt this Period FEC ID number of contributing C 161.86 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$80.93 Bi-Weekly) 473.58 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. William Grub Date of Receipt Mailing Address 20 Preserve Island Circle 03 31 2016 City State Zip Code Transaction ID: PR4487514206 Ponte Vedra Beach FL 32082-4653 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34 Full Name (Last, First, Middle Initial) c. Mr. Robert A. Hodgkiss Date of Receipt Mailing Address 5824 Fairmount Avenue 03 31 2016 Zip Code

| FEC ID number of contributing federal political committee. | C                                | 230.78                             |  |  |  |  |  |  |
|------------------------------------------------------------|----------------------------------|------------------------------------|--|--|--|--|--|--|
| Name of Employer  New York Life Insurance Company          | Occupation Managing Partner      | Memo Item                          |  |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼           | Aggregate Year-to-Date ▼  692.34 | P/R Deduction (\$115.39 Bi-Weekly) |  |  |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                  |                                  |                                    |  |  |  |  |  |  |
| OTAL This Period (last page this line number only)         |                                  |                                    |  |  |  |  |  |  |

60516-1411

State

IL

City

**Downers Grove** 

Transaction ID: PR4489114206

Amount of Each Receipt this Period

FOR LINE NUMBER: PAGE 79 OF 175

| TEMIZED RECEIPTS                                                                                  | for each category of the Detailed Summary Page         | (cneck only one)    X   11a                                       |  |  |  |  |
|---------------------------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------|--|--|--|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the   |                                                        | erson for the purpose of soliciting contributions                 |  |  |  |  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                        | any Political Action Committee                         |                                                                   |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. George M. Kay  Mailing Address 300 Ivy Springs Court |                                                        | Date of Receipt                                                   |  |  |  |  |
| City                                                                                              | State Zip Code                                         | 03 31 2016 Transaction ID : PR4489214206                          |  |  |  |  |
| Waxhaw                                                                                            | NC 28173-7455                                          | Amount of Each Receipt this Period                                |  |  |  |  |
| FEC ID number of contributing federal political committee.                                        | С                                                      | 153.86                                                            |  |  |  |  |
| Name of Employer  New York Life Insurance Company  Receipt For:                                   | Occupation  Managing Partner  Aggregate Year-to-Date ▼ | Memo Item                                                         |  |  |  |  |
| Primary General Other (specify) ▼                                                                 | 461.58                                                 | P/R Deduction (\$76.93 Bi-Weekly)                                 |  |  |  |  |
| Full Name (Last, First, Middle Initial)  3. Mr. Joseph J. La Pietra                               |                                                        | Date of Receipt                                                   |  |  |  |  |
| Mailing Address 11208 Tildencrest Court                                                           |                                                        | 03 31 2016 _                                                      |  |  |  |  |
| City                                                                                              | State Zip Code                                         | Transaction ID : PR4489314206                                     |  |  |  |  |
| Potomac                                                                                           | otomac MD 20854-2746                                   |                                                                   |  |  |  |  |
| FEC ID number of contributing federal political committee.                                        | C                                                      | 230.78                                                            |  |  |  |  |
| Name of Employer<br>New York Life Insurance Company                                               | Occupation  Managing Partner                           | Memo Item                                                         |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                  | Aggregate Year-to-Date ▼ 692.34                        | P/R Deduction (\$115.39 Bi-Weekly)                                |  |  |  |  |
| Full Name (Last, First, Middle Initial)  C. Mr. Mark J. Madgett                                   |                                                        | Date of Receipt                                                   |  |  |  |  |
| Mailing Address 25 Broad Street Apt. 17I                                                          |                                                        | 03 31 2016                                                        |  |  |  |  |
| City<br>New York                                                                                  | State Zip Code<br>NY 10004-2574                        | Transaction ID : PR4489514206  Amount of Each Receipt this Period |  |  |  |  |
| FEC ID number of contributing federal political committee.                                        | С                                                      | 230.78                                                            |  |  |  |  |
| Name of Employer                                                                                  | Occupation                                             | Memo Item                                                         |  |  |  |  |
| New York Life Insurance Company                                                                   | Svp & Head of Agency                                   |                                                                   |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                  | Aggregate Year-to-Date ▼ 692.34                        | P/R Deduction (\$115.39 Bi-Weekly)                                |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                         |                                                        | 615.42                                                            |  |  |  |  |
| TOTAL This Period (last page this line number                                                     | only)                                                  |                                                                   |  |  |  |  |

|                                                | FOF  | R LINE  | NU | MBER | : | PAGE | : 8 | 30 O | F | 175 |
|------------------------------------------------|------|---------|----|------|---|------|-----|------|---|-----|
| Use separate schedule(s)                       | (che | ck only | or | ne)  |   |      |     |      |   |     |
| for each category of the Detailed Summary Page | X    | 11a     |    | 11b  |   | 11c  |     | 12   |   |     |
| ,,g.                                           |      | 13      |    | 14   |   | 15   |     | 16   |   | 17  |

| Any information copied from such Reports and S<br>or for commercial purposes, other than using the |                                    |                                          |
|----------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------|
| NAME OF COMMITTEE (In Full)                                                                        |                                    |                                          |
| New York Life Insurance Comp                                                                       | any Political Action Committee     |                                          |
| Full Name (Last, First, Middle Initial)  Mr. Jerry B. McKinney                                     |                                    | Date of Receipt                          |
| Mailing Address 500 Liberty Street Southeast<br>Suite 500                                          |                                    | 03 31 _ 2016 _                           |
| City                                                                                               | State Zip Code                     | Transaction ID : PR4489614206            |
| Salem                                                                                              | OR 97301-3899                      | Amount of Each Receipt this Period       |
| FEC ID number of contributing federal political committee.                                         | C                                  | 230.78                                   |
| Name of Employer                                                                                   | Occupation                         | Memo Item                                |
| New York Life Insurance Company                                                                    | Managing Partner                   |                                          |
| Receipt For:  Primary General  Other (specify) ▼                                                   | Aggregate Year-to-Date ▼ 692.34    | P/R Deduction (\$115.39 Bi-Weekly)       |
| Full Name (Last, First, Middle Initial)  Mr. Roland Ghazal                                         |                                    | Date of Receipt                          |
| Mailing Address 841 Bishop Street #1900                                                            |                                    | M = M / D = D / Y = Y = Y = Y            |
| City                                                                                               | State Zip Code                     | 03 31 2016 Transaction ID : PR4489714206 |
| Honolulu                                                                                           | Amount of Each Receipt this Period |                                          |
| FEC ID number of contributing                                                                      | HI 96813-3957                      | 5. 255. 1.555pt and 1.5156               |
| federal political committee.                                                                       | 153.86                             |                                          |
| Name of Employer                                                                                   | Occupation                         | Memo Item                                |
| New York Life Insurance Company                                                                    | Managing Partner                   | _                                        |
| Receipt For:                                                                                       | Aggregate Year-to-Date ▼           |                                          |
| Primary General Other (specify) ▼                                                                  | 461.58                             | P/R Deduction (\$76.93 Bi-Weekly)        |
| Full Name (Last, First, Middle Initial)  Mr. Michael F. Scovel                                     |                                    | Date of Receipt                          |
| Mailing Address 6397 Shady Oaks Drive                                                              |                                    | 03 31 2016                               |
| City                                                                                               | State Zip Code                     | Transaction ID : PR4490014206            |
| Frisco                                                                                             | TX 75034-7236                      | Amount of Each Receipt this Period       |
| FEC ID number of contributing federal political committee.                                         | C                                  | 230.76                                   |
| Name of Employer                                                                                   | Occupation                         | Memo Item                                |
| New York Life Insurance Company                                                                    | Managing Partner                   |                                          |
| Receipt For:                                                                                       | Aggregate Year-to-Date ▼           |                                          |
| Primary General  Other (specify) ▼                                                                 | 692.28                             | P/R Deduction (\$115.38 Bi-Weekly)       |
| SUBTOTAL of Receipts This Page (optional)                                                          |                                    | 615.40                                   |
| TOTAL This Period (last page this line number                                                      | only)                              |                                          |

FOR LINE NUMBER: PAGE 81 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                                                                                                                                                                                                       |                                                                                                                 | for each category of the<br>Detailed Summary Page | X   11a                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and St or for commercial purposes, other than using the                                                                                                                                       |                                                                                                                 |                                                   |                                                                                                                  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                             |                                                                                                                 |                                                   |                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. Mehmood N. Daya  Mailing Address 22106 Grand Cove Court  City Katy  FEC ID number of contributing federal political committee.  Name of Employer                                          | Date of Receipt  03 31 2016  Transaction ID: PR4490514206  Amount of Each Receipt this Period  76.94  Memo Item |                                                   |                                                                                                                  |
| New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                      | Senior Part Aggregate                                                                                           |                                                   | P/R Deduction (\$38.47 Bi-Weekly)                                                                                |
| Full Name (Last, First, Middle Initial)  Ms. Joanne E. Jenkins  Mailing Address 7 Liberty Way  City                                                                                                                                    | State                                                                                                           | Zip Code                                          | Date of Receipt  03 31 2016  Transaction ID: PR4553714206                                                        |
| Loudonville  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company                                                                                                             | Occupation Vice Presid                                                                                          |                                                   | Amount of Each Receipt this Period  76.94  Memo Item                                                             |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                       | Aggregate                                                                                                       | Year-to-Date ▼  230.82                            | P/R Deduction (\$38.47 Bi-Weekly)                                                                                |
| Full Name (Last, First, Middle Initial)  Mr. Michael Gavin  Mailing Address 14 Highland Park Lane Norther  City Atlanta  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company | State GA  C Occupation Zone Vice I                                                                              |                                                   | Date of Receipt  03 31 2016  Transaction ID: PR4554814206  Amount of Each Receipt this Period  115.38  Memo Item |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                       | Aggregate                                                                                                       | Year-to-Date ▼ 346.14                             | P/R Deduction (\$57.69 Bi-Weekly)                                                                                |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                              |                                                                                                                 | ·····                                             | 269.26                                                                                                           |
| TOTAL This Period (last page this line number of                                                                                                                                                                                       | only)                                                                                                           |                                                   |                                                                                                                  |

|                                                | FOR LINE NUMBER: | PAGE | 82 OF | 175 |
|------------------------------------------------|------------------|------|-------|-----|
| Use separate schedule(s)                       | (check only one) |      |       |     |
| for each category of the Detailed Summary Page | X 11a 11b        | 11c  | 12    |     |
|                                                | 13 14            | 15   | 16    | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Domenico V. Nuzzi Date of Receipt Mailing Address 21 Chambry Court 31 2016 City Zip Code State Transaction ID: PR45814206 Freehold NJ 07728-9067 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$125.00 Monthly) 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joseph M. Franklin Date of Receipt Mailing Address 4 Putnam Hill Apt. 2G 03 31 2016 City State Zip Code Transaction ID: PR47614206 CT 06830-5713 Greenwich Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) Other (specify) 249,99 Full Name (Last, First, Middle Initial) c. Mr. John F. Di Palermo Date of Receipt Mailing Address 3297 Padilla Way 03 31 2016 City State Zip Code Transaction ID: PR50414206 CA San Jose 95148-2746 Amount of Each Receipt this Period FEC ID number of contributing С 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) 266.02 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9

299.67

|                                                | F  | ЭR | LINE    | NU | MBER | : | PAGE | : 8 | 33 OF | : ' | 175 |
|------------------------------------------------|----|----|---------|----|------|---|------|-----|-------|-----|-----|
| Use separate schedule(s)                       | (c | he | ck only | or | ne)  |   |      |     |       |     |     |
| for each category of the Detailed Summary Page |    | X  | 11a     |    | 11b  |   | 11c  |     | 12    |     |     |
|                                                |    |    | 13      |    | 14   |   | 15   |     | 16    |     | 17  |

| Any information copied from such Reports and S<br>or for commercial purposes, other than using the | tatements may not be sold or used by any personame and address of any political committee to |                                    |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------|--|--|--|--|--|
| NAME OF COMMITTEE (In Full)                                                                        | B.100                                                                                        |                                    |  |  |  |  |  |
| New York Life Insurance Compa                                                                      | any Political Action Committee                                                               |                                    |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Michael Stribling                                     |                                                                                              | Date of Receipt                    |  |  |  |  |  |
| Mailing Address 6845 Glenlake Parkway Apt. 4                                                       | 5-A                                                                                          | 03 31 2016                         |  |  |  |  |  |
| City                                                                                               | State Zip Code                                                                               | Transaction ID : PR50814206        |  |  |  |  |  |
| Sandy Springs                                                                                      | GA 30328-7209                                                                                | Amount of Each Receipt this Period |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                         | C                                                                                            | 83.34                              |  |  |  |  |  |
| Name of Employer                                                                                   | Occupation                                                                                   | Memo Item                          |  |  |  |  |  |
| New York Life Insurance Company                                                                    | Agent                                                                                        |                                    |  |  |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                                   | Aggregate Year-to-Date ▼  250.02                                                             | P/R Deduction (\$83.34 Monthly)    |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. David R. Tarella                                      |                                                                                              | Date of Receipt                    |  |  |  |  |  |
| Mailing Address 15 Saratoga Farm Road                                                              |                                                                                              | M = M / D = D / Y = Y = Y          |  |  |  |  |  |
| City                                                                                               | State Zip Code                                                                               | 03 31 2016                         |  |  |  |  |  |
| City<br>Malta                                                                                      | State Zip Code  NY 12020-3765                                                                | Transaction ID : PR50914206        |  |  |  |  |  |
|                                                                                                    |                                                                                              | Amount of Each Receipt this Period |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                         | C                                                                                            | 83.34                              |  |  |  |  |  |
| ·                                                                                                  | Occupation                                                                                   | Memo Item                          |  |  |  |  |  |
| Name of Employer  New York Life Insurance Company                                                  | Occupation                                                                                   |                                    |  |  |  |  |  |
| Receipt For:                                                                                       | Agent                                                                                        |                                    |  |  |  |  |  |
| Primary General  Other (specify) ▼                                                                 | Aggregate Year-to-Date ▼  233.34                                                             | P/R Deduction (\$83.34 Monthly)    |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  Mr. Brian M. O'Neill                                      |                                                                                              | Date of Receipt                    |  |  |  |  |  |
| Mailing Address 45 Saint Michaels Terrace                                                          |                                                                                              | 03 31 2016                         |  |  |  |  |  |
| City                                                                                               | State Zip Code                                                                               | Transaction ID : PR51014206        |  |  |  |  |  |
| Carmel                                                                                             | NY 10512-2006                                                                                | Amount of Each Receipt this Period |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                         | C                                                                                            | 76.94                              |  |  |  |  |  |
| Name of Employer                                                                                   | Occupation                                                                                   | Memo Item                          |  |  |  |  |  |
| New York Life Insurance Company                                                                    | Vice President & Deputy General Counse                                                       |                                    |  |  |  |  |  |
| Receipt For:                                                                                       |                                                                                              |                                    |  |  |  |  |  |
| Primary General Other (specify) ▼                                                                  | 230.82                                                                                       | P/R Deduction (\$38.47 Bi-Weekly)  |  |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                          |                                                                                              | 243.62                             |  |  |  |  |  |
| TOTAL This Period (last page this line number                                                      | only)                                                                                        |                                    |  |  |  |  |  |

FOR LINE NUMBER: PAGE 84 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Mary Hallahan Date of Receipt Mailing Address 172 Wayne Avenue 2016 31 City Zip Code State Transaction ID: PR51214206 River Edge NJ 07661-1106 Amount of Each Receipt this Period FEC ID number of contributing 80.94 federal political committee. Memo Item Name of Employer Occupation Vice President & Assistant Treasurer New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.47 Bi-Weekly) 234.82 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Irving Flamer Date of Receipt Mailing Address 3 Linden Lane 03 31 2016 City State Zip Code Transaction ID: PR51914206 Old Westbury NY 11568-1609 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) **c.** Mr. Howard Levy Date of Receipt Mailing Address 21 Richard Avenue 03 31 2016 City Zip Code State Transaction ID: PR53414206 MA Sudbury 01776-2115 Amount of Each Receipt this Period FEC ID number of contributing С 151.86 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.93 Bi-Weekly) 455.58 Other (specify) 316.14 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 85 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Robert H. Petrocelli Jr. Date of Receipt Mailing Address 10 Byrd Street 2016 31 City Zip Code State Transaction ID: PR53714206 NY Rye 10580-2407 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Jeanmarie A. Deliso Date of Receipt Mailing Address 43 Primrose Drive 03 31 2016 City State Zip Code Transaction ID: PR5401914206 MA Longmeadow 01106-2531 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.00 Monthly) Other (specify) 249,00 Full Name (Last, First, Middle Initial) c. Ms. Adrian L. Williams Date of Receipt Mailing Address 20008 Northwest 85th Avenue 03 31 2016 City State Zip Code Transaction ID: PR5408014206 FL Hialeah 33015-6933 Amount of Each Receipt this Period FEC ID number of contributing С 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) 249.99 Other (specify) 333.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 86 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Jude A. Watters Date of Receipt Mailing Address 6000 E 2nd Street Suite 2002 2016 31 City Zip Code State Transaction ID: PR5422314206 WY Casper 82609-4347 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Robert D. Hartman Date of Receipt Mailing Address 461 Kingston Plantation Boulevard 03 31 2016 City State Zip Code Transaction ID: PR5425614206 LA **Benton** 71006-3404 Amount of Each Receipt this Period FEC ID number of contributing 230.76 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.38 Bi-Weekly) Other (specify) 692.28 Full Name (Last, First, Middle Initial) c. Ms. Aeramy K. Porter Date of Receipt Mailing Address 1124 N Linden Circle 03 31 2016 City State Zip Code Transaction ID: PR5428214206 KS Wichita 67206-4074 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 580.76 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 87 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Michael F. Barry Date of Receipt Mailing Address 3 Evergreen Lane 2016 31 City Zip Code State Transaction ID: PR5476214206 Walpole MA 02081-2142 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Tony DeLeon Date of Receipt Mailing Address 1101 W Annie Street 03 31 2016 City State Zip Code Transaction ID: PR5476414206 TX Austin 78704-4110 Amount of Each Receipt this Period FEC ID number of contributing 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) Other (specify) 266.02 Full Name (Last, First, Middle Initial) c. Ms. Kristen E. Gulbran Date of Receipt Mailing Address 3236 Cascadia Avenue S 03 31 2016 City Zip Code State Transaction ID: PR5476714206 WA Seattle 98144-7024 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 441.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 88 OF 175 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Todd S. Purich Date of Receipt Mailing Address 6332 Battleview Drive 2016 31 City Zip Code State Transaction ID: PR5476814206 NC Raleigh 27613-7148 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jeffrey E. Thol Date of Receipt Mailing Address 736 High Street 03 31 2016 City State Zip Code Transaction ID: PR5477114206 PA Honesdale 18431-1738 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Frank Scarpa Date of Receipt Mailing Address 7900 Bainbridge Road 03 31 2016 City Zip Code State Transaction ID: PR55914206 OH Chagrin Falls 44023-2104 Amount of Each Receipt this Period FEC ID number of contributing С 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) 730.78 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: (check only one) PAGE 89 OF 175 Use separate schedule(s)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                                    | for each category of the<br>Detailed Summary Page                                         | X   11a                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                                                     |                                                                                           |                                                                                                                                                    |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                                          | any Political Action Committee                                                            |                                                                                                                                                    |
| Full Name (Last, First, Middle Initial)  Mr. Roberto Recine  Mailing Address 1402 Crestview Drive  PO Box 512  City  Gwynedd Valley  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State Zip Code PA 19437  C  Occupation Managing Partner  Aggregate Year-to-Date ▼  692.28 | Date of Receipt  03 31 2016  Transaction ID: PR56114206  Amount of Each Receipt this Period  230.76  Memo Item  P/R Deduction (\$115.38 Bi-Weekly) |
| Full Name (Last, First, Middle Initial)  Mr. Akshay Madan  Mailing Address 1300 Concord Terrace  5Th. Floor  City  Sunrise  FEC ID number of contributing federal political committee.                                                                                                              | State Zip Code FL 33323-2899                                                              | Date of Receipt  M M / D D / Y Y Y Y Y  03 31 2016  Transaction ID : PR56514206  Amount of Each Receipt this Period  230.78                        |
| Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                 | Occupation  Managing Partner  Aggregate Year-to-Date ▼  692.34                            | P/R Deduction (\$115.39 Bi-Weekly)                                                                                                                 |
| Full Name (Last, First, Middle Initial)  Mr. Michael F. Broderick  Mailing Address 170 Clapboardtree Street  City Westwood  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company  Receipt For:  Primary General Other (specify)             | State Zip Code MA 02090-2906  C  Occupation Agent  Aggregate Year-to-Date ▼               | Date of Receipt  03 31 2016  Transaction ID: PR5661514206  Amount of Each Receipt this Period  350.00  Memo Item  P/R Deduction (\$350.00 Monthly) |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                                           | ·····                                                                                     | 811.54                                                                                                                                             |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                                       | only)                                                                                     |                                                                                                                                                    |

FOR LINE NUMBER: PAGE 90 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. James M. Smith Date of Receipt Mailing Address 6414 Hickorycrest Drive 2016 31 City Zip Code State Transaction ID: PR5662814206 Spring TX 77389-5230 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Marc I. Rosenthal Date of Receipt Mailing Address 5493 Pine Loch Lane 03 31 2016 City State Zip Code Transaction ID: PR5664814206 Williamsville NY 14221-8538 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 650,00 Full Name (Last, First, Middle Initial) c. Ms. Barbara J. McInerney Date of Receipt Mailing Address 35 Sutton Place 03 31 2016 Apt. 15A City Zip Code State Transaction ID: PR5751314206 NY New York 10022-2429 Amount of Each Receipt this Period FEC ID number of contributing С 84.94 federal political committee. Memo Item Name of Employer Occupation Svp & Chief Compliance Officer New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.47 Bi-Weekly) 242.82 Other (specify) 418.28 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                  | for each category of the Detailed Summary Page                                                    | (check only one)       X     11a     11b     11c     12       13     14     15     16     17                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                   | d Statements may not be sold or used by any pe<br>the name and address of any political committee | rson for the purpose of soliciting contributions                                                                                                   |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Com                                                                                                                                                                                                                          | pany Political Action Committee                                                                   |                                                                                                                                                    |
| Full Name (Last, First, Middle Initial)  Mr. Bradley J. Jensen  Mailing Address 4602 S Key Avenue  City Sioux Falls  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) | State Zip Code SD 57106-7519  C  Occupation Managing Partner  Aggregate Year-to-Date ▼  230.76    | Date of Receipt  03 31 2016  Transaction ID: PR5755414206  Amount of Each Receipt this Period  76.92  Memo Item  P/R Deduction (\$38.46 Bi-Weekly) |
| Full Name (Last, First, Middle Initial)  Mr. William J. Terry, III  Mailing Address 43 Winchester Road                                                                                                                                                                            |                                                                                                   | Date of Receipt  03 31 2016                                                                                                                        |
| City<br>Arlington                                                                                                                                                                                                                                                                 | State Zip Code<br>MA 02474-1019                                                                   | Transaction ID : PR5755514206  Amount of Each Receipt this Period                                                                                  |
| FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company                                                                                                                                                                     | Occupation Senior Partner                                                                         | 153.86  Memo Item                                                                                                                                  |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                                                  | Aggregate Year-to-Date ▼ 461.58                                                                   | P/R Deduction (\$76.93 Bi-Weekly)                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. David A. Odom  Mailing Address 8426 Beeswing Court                                                                                                                                                                                   |                                                                                                   | Date of Receipt                                                                                                                                    |
| City                                                                                                                                                                                                                                                                              | State Zip Code                                                                                    | 03 31 2016<br>Transaction ID : PR5755714206                                                                                                        |
| Dublin                                                                                                                                                                                                                                                                            | OH 43017-9724                                                                                     | Amount of Each Receipt this Period                                                                                                                 |
| FEC ID number of contributing federal political committee.                                                                                                                                                                                                                        | C                                                                                                 | 230.76                                                                                                                                             |
| Name of Employer                                                                                                                                                                                                                                                                  | Occupation                                                                                        | Memo Item                                                                                                                                          |
| New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                 | Managing Partner  Aggregate Year-to-Date ▼  692.28                                                | P/R Deduction (\$115.38 Bi-Weekly)                                                                                                                 |
| SUBTOTAL of Receipts This Page (optional).                                                                                                                                                                                                                                        | · · · · · · · · · · · · · · · · · · ·                                                             | 461.54                                                                                                                                             |
| TOTAL This Period (last page this line numb                                                                                                                                                                                                                                       | er only)                                                                                          |                                                                                                                                                    |

FOR LINE NUMBER: PAGE 92 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Kevin E. Boland Date of Receipt Mailing Address 3993 Howard Hughes Parkway #500 2016 31 City Zip Code State Transaction ID: PR5756014206 NV Las Vegas 89169-6700 Amount of Each Receipt this Period FEC ID number of contributing 153.86 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$76.93 Bi-Weekly) 461.58 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Hugh J. Smith Date of Receipt Mailing Address 755 Black Plain Road 03 31 2016 City State Zip Code Transaction ID: PR5756314206 North Smithfield RΙ 02896-9569 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Bi-Weekly) Other (specify) 240,00 Full Name (Last, First, Middle Initial) c. Mr. Thomas J. Troeller Date of Receipt Mailing Address 4709 Sweetmeadow Circle 03 31 2016 City Zip Code State Transaction ID: PR58214206 FL Sarasota 34238-4336 Amount of Each Receipt this Period FEC ID number of contributing С 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Vice President & Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 310.80 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOR LINE NUMBER: | PAGE              | 93 OF       | 175 |
|------------------------------------------------|------------------|-------------------|-------------|-----|
| Use separate schedule(s)                       | (check only one) |                   |             |     |
| for each category of the Detailed Summary Page | X 11a 11b        | 11c               | 12          |     |
|                                                | 13 14            | ] <sub>15</sub> [ | <b>□</b> 16 | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| or                                                                                              | for commercial purposes, other than using the                                                        | name and address of any political committee to              | solicit contributions from such committee.                                    |
|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------------------------|
| $\rangle$                                                                                       | NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                           | any Political Action Committee                              |                                                                               |
| Full Name (Last, First, Middle Initial)  Mr. Nicola lannitelli  Mailing Address 1 Brown Terrace |                                                                                                      |                                                             | Date of Receipt                                                               |
|                                                                                                 | City Denville                                                                                        | State Zip Code<br>NJ 07834-4902                             | 03 31 2016  Transaction ID : PR5861314206  Amount of Each Receipt this Period |
|                                                                                                 | FEC ID number of contributing federal political committee.                                           | C                                                           | 230.78                                                                        |
|                                                                                                 | Name of Employer  New York Life Insurance Company  Receipt For:                                      | Occupation Managing Partner                                 | Memo Item                                                                     |
|                                                                                                 | Primary General  Other (specify) ▼                                                                   | Aggregate Year-to-Date ▼  692.34                            | P/R Deduction (\$115.39 Bi-Weekly)                                            |
| 3.                                                                                              | Full Name (Last, First, Middle Initial)  Mr. Frank Lusk  Mailing Address 13104 E Copper River Lane   |                                                             | Date of Receipt                                                               |
|                                                                                                 | City<br>Spokane                                                                                      | State Zip Code<br>WA 99206-7057                             | 03 31 2016  Transaction ID : PR5861514206  Amount of Each Receipt this Period |
|                                                                                                 | FEC ID number of contributing federal political committee.                                           | C                                                           | 230.78 Memo Item                                                              |
|                                                                                                 | Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼  | Occupation Senior Partner  Aggregate Year-to-Date ▼  692.34 | P/R Deduction (\$115.39 Bi-Weekly)                                            |
| <b>D</b> .                                                                                      | Full Name (Last, First, Middle Initial) Mr. Scot R. Bradstreet  Mailing Address 8 Parkman Brook Lane |                                                             | Date of Receipt                                                               |
|                                                                                                 | City<br>Stratham                                                                                     | State         Zip Code           NH         03885-6530      | 03 31 2016  Transaction ID : PR6014206  Amount of Each Receipt this Period    |
|                                                                                                 | FEC ID number of contributing federal political committee.                                           | C                                                           | 100.00                                                                        |
|                                                                                                 | Name of Employer  New York Life Insurance Company                                                    | Occupation<br>Agent                                         | Memo Item                                                                     |
|                                                                                                 | Receipt For:  Primary General  Other (specify) ▼                                                     | Aggregate Year-to-Date ▼ 300.00                             | P/R Deduction (\$100.00 Monthly)                                              |
| s                                                                                               | UBTOTAL of Receipts This Page (optional)                                                             |                                                             | 561.56                                                                        |
| T                                                                                               | OTAL This Period (last page this line number of                                                      | only)                                                       |                                                                               |

FOR LINE NUMBER: PAGE 94 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Shane K. Stromei Date of Receipt Mailing Address 4505 Hampton View Drive 2016 31 City Zip Code State Transaction ID: PR60500914206 Owens Cross Roads AL 35763-5708 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Taylor M. Sledge Jr. Date of Receipt Mailing Address 4752 E Massena Drive 03 31 2016 City State Zip Code Transaction ID: PR60520814206 MS Jackson 39211-4930 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Jonathan T. Paone Date of Receipt Mailing Address 57 Van Doren Avenue 03 31 2016 City Zip Code State Transaction ID: PR6059614206 NJ Chatham 07928-2213 Amount of Each Receipt this Period FEC ID number of contributing С 76.94 federal political committee. Memo Item Name of Employer Occupation Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 391.06 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 95 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. William E. Mahoney Jr. Date of Receipt Mailing Address 936 Intracoastal Drive Apt. 14F 2016 31 City Zip Code State Transaction ID: PR6114206 FL Fort Lauderdale 33304-3666 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John S. Hamel Date of Receipt Mailing Address 184 Perry Avenue 03 31 2016 City State Zip Code Transaction ID: PR6118914206 CT Norwalk 06850-1137 Amount of Each Receipt this Period FEC ID number of contributing 120.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$60.00 Bi-Weekly) Other (specify) 342,12 Full Name (Last, First, Middle Initial) c. Mr. Johnson O. Kho Date of Receipt Mailing Address 110 Westminster Road 03 31 2016 City Zip Code State Transaction ID: PR61214206 NY Scarsdale 10583-2425 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 266.68 Other (specify) 470.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 96 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Richard Cunningham Date of Receipt Mailing Address 8103 Bell Mountain Drive 2016 31 City Zip Code State Transaction ID: PR6129714206 78730-2822 Austin TX Amount of Each Receipt this Period FEC ID number of contributing 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) 266.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jose A. Narvaez Date of Receipt Mailing Address 3516 34th Street Apt. 6F 03 31 2016 City State Zip Code Transaction ID: PR6134714206 NY Long Island City 11106-1929 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Larry E. Botts Date of Receipt Mailing Address 3015 E Leestown Road 03 31 2016 City Zip Code State Transaction ID: PR6137714206 KY Midway 40347-9769 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 424.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 97 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Donald E. Lippencott Date of Receipt Mailing Address 73 Shore Road 2016 31 City Zip Code State Transaction ID: PR6138214206 NY East Setauket 11733-3932 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Leslie J. Marsh Date of Receipt Mailing Address PO Box 1792 03 31 2016 City State Zip Code Transaction ID: PR6139614206 MT **Great Falls** 59403-1792 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Randall D. Hart Date of Receipt Mailing Address 3547 State Route 7 03 31 2016 City Zip Code State Transaction ID: PR6142414206 OH **New Waterford** 44445-8719 Amount of Each Receipt this Period FEC ID number of contributing С 158.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$158.00 Monthly) 458.00 Other (specify) 658.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                                                                                                                                                                                                           | for each category of the<br>Detailed Summary Page                           | X   11a                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and St or for commercial purposes, other than using the                                                                                                                                                                           |                                                                             |                                                                                                                                                  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                 | any Political Action Committee                                              |                                                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. Russell F. Bicker  Mailing Address 125 Poplar Forest Drive  City Slippery Rock  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General | State Zip Code PA 16057-8527  C  Occupation Agent  Aggregate Year-to-Date ▼ | Date of Receipt  03 31 2016  Transaction ID: PR6143514206  Amount of Each Receipt this Period  83.33  Memo Item  P/R Deduction (\$83.33 Monthly) |
| Other (specify) ▼  Full Name (Last, First, Middle Initial)                                                                                                                                                                                                                 | 249.99                                                                      |                                                                                                                                                  |
| Mr. John A. Pereira  Mailing Address 2815 E 10th Street                                                                                                                                                                                                                    |                                                                             | Date of Receipt  03 31 2016                                                                                                                      |
| City The Dalles                                                                                                                                                                                                                                                            | State Zip Code OR 97058-4020                                                | Transaction ID : PR6143714206  Amount of Each Receipt this Period                                                                                |
| FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company                                                                                                                                                              | Occupation Agent                                                            | 83.33 Memo Item                                                                                                                                  |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                                           | Aggregate Year-to-Date ▼  249.99                                            | P/R Deduction (\$83.33 Monthly)                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. John T. Blanks  Mailing Address 1603 Langhorne Road                                                                                                                                                                           |                                                                             | Date of Receipt  03 31 2016                                                                                                                      |
| City<br>Lynchburg                                                                                                                                                                                                                                                          | State Zip Code<br>VA 24503-3117                                             | Transaction ID : PR6144414206                                                                                                                    |
| FEC ID number of contributing federal political committee.                                                                                                                                                                                                                 | C                                                                           | Amount of Each Receipt this Period  166.67                                                                                                       |
| Name of Employer  New York Life Insurance Company  Receipt For:                                                                                                                                                                                                            | Occupation<br>Agent                                                         | Memo Item                                                                                                                                        |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                                           | Aggregate Year-to-Date ▼ 500.01                                             | P/R Deduction (\$166.67 Monthly)                                                                                                                 |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                  | ·····                                                                       | 333.33                                                                                                                                           |
| TOTAL This Period (last page this line number of                                                                                                                                                                                                                           | only)                                                                       |                                                                                                                                                  |

FOR LINE NUMBER: PAGE 99 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Rodney S. Ferguson Date of Receipt Mailing Address 466 Blackwolf Run Drive 2016 31 City Zip Code State Transaction ID: PR6144614206 MO Wildwood 63040-1571 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Mary Stockton Date of Receipt Mailing Address 3545 32nd Street 03 31 2016 City State Zip Code Transaction ID: PR6144914206 CA San Diego 92104-4304 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) **c.** Mr. Thomas J. Kanaley Jr. Date of Receipt Mailing Address 150 Lenox Way 03 31 2016 City Zip Code State Transaction ID: PR6145214206 CA San Francisco 94127-1113 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 500.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 100 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Robert J. Poindexter Date of Receipt Mailing Address 351 Janie Lane 2016 31 City Zip Code State Transaction ID: PR6146914206 71106-6028 Shreveport LA Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brian P. Ruh Date of Receipt Mailing Address 23702 W Steinthal Road 03 31 2016 City State Zip Code Transaction ID: PR6148514206 WI Kiel 53042-4994 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) **c.** Mr. Robert Hebron Date of Receipt Mailing Address 231 Wyoming Avenue 03 31 2016 City Zip Code State Transaction ID: PR61514206 NJ Maplewood 07040-2013 Amount of Each Receipt this Period FEC ID number of contributing С 76.94 federal political committee. Memo Item Name of Employer Occupation Senior Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 576.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 101 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Diane H. Gould Date of Receipt Mailing Address 1102 Prospect Hill Place 2016 31 City Zip Code State Transaction ID: PR63814206 MD Rockville 20850-2868 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Arthur H. Seter Date of Receipt Mailing Address 1 Merion Drive 03 31 2016 City State Zip Code Transaction ID: PR6426614206 NY Purchase 10577-1301 Amount of Each Receipt this Period FEC ID number of contributing 153.86 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$76.93 Bi-Weekly) Other (specify) 461,58 Full Name (Last, First, Middle Initial) c. Ms. Elizabeth W. McCarthy Date of Receipt Mailing Address 124 College Place 03 31 2016 City Zip Code State Transaction ID: PR6427314206 NJ South Orange 07079-2506 Amount of Each Receipt this Period FEC ID number of contributing С 230.78 federal political committee. Memo Item Name of Employer Occupation Senior Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) 634.64 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Michael P. Arnheiter Date of Receipt Mailing Address 1152 Buttonwood Lane 2016 31 City Zip Code State Transaction ID: PR64514206 FL Sanibel 33957-7304 Amount of Each Receipt this Period FEC ID number of contributing 416.66 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$416.66 Monthly) 1249.98 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John A. Foster Date of Receipt Mailing Address 5622 Bowmiller Road 03 31 2016 City State Zip Code Transaction ID: PR6472014206 NY Lockport 14094-9050 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82 Full Name (Last, First, Middle Initial) c. Mr. Puneet Seth Date of Receipt Mailing Address 860 Old Plank Square 03 31 2016 City State Zip Code Transaction ID: PR6543414206 GA Johns Creek 30097-1924 Amount of Each Receipt this Period FEC ID number of contributing С 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 570.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 103 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. John P. Curry Date of Receipt Mailing Address 27 Flax Pond Woods Road 2016 31 City Zip Code State Transaction ID: PR6543514206 NY Setauket 11733-1623 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mike T. Bui Date of Receipt Mailing Address 1911 Empire Circle 03 31 2016 City State Zip Code Transaction ID: PR6544714206 TX Arlington 76002-6605 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Brian R. Lescinskas Date of Receipt Mailing Address 21 Conley Court 03 31 2016 City State Zip Code Transaction ID: PR6544814206 CT Ridgefield 06877-3202 Amount of Each Receipt this Period FEC ID number of contributing С 230.76 federal political committee. Memo Item Name of Employer Occupation Zone Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.38 Bi-Weekly) 692.28 Other (specify) 561.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| TEMIZED RECEIPTS                                                                          |              | for each category of the | X 11a 11b 11c 12                                  |  |
|-------------------------------------------------------------------------------------------|--------------|--------------------------|---------------------------------------------------|--|
|                                                                                           |              | Detailed Summary Page    | 13 14 15 16 17                                    |  |
| Any information copied from such Reports and or for commercial purposes, other than using |              |                          | erson for the purpose of soliciting contributions |  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Com                                  | npany Politi | cal Action Committee     |                                                   |  |
| Full Name (Last, First, Middle Initial)  A. Mr. Angelo J. Scialabba                       |              |                          | Date of Receipt                                   |  |
| Mailing Address 47 Lake Shore Drive                                                       |              |                          | 03 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y       |  |
| City                                                                                      | State        | Zip Code                 | Transaction ID : PR6545314206                     |  |
| Eastchester                                                                               | NY           | 10709-5216               | Amount of Each Receipt this Period                |  |
| FEC ID number of contributing federal political committee.                                | C            |                          | 84.94                                             |  |
| Name of Employer                                                                          | Occupation   |                          | Memo Item                                         |  |
| New York Life Insurance Company                                                           | Vice Presid  | ent                      |                                                   |  |
| Receipt For:                                                                              | Aggregate    | Year-to-Date ▼           |                                                   |  |
| Primary General  Other (specify) ▼                                                        |              | 242.82                   | P/R Deduction (\$42.47 Bi-Weekly)                 |  |
| Full Name (Last, First, Middle Initial) Mr. Kevin Curry                                   |              |                          | Date of Receipt                                   |  |
| Mailing Address 75 Upland Road                                                            |              | 03 31 2016               |                                                   |  |
| City                                                                                      | State        | Zip Code                 | Transaction ID: PR6546514206                      |  |
| New Milford                                                                               | СТ           | 06776-2102               | Amount of Each Receipt this Period                |  |
| FEC ID number of contributing federal political committee.                                | С            |                          | 154.00                                            |  |
| Name of Employer                                                                          | Occupation   |                          | Memo Item                                         |  |
| New York Life Insurance Company                                                           | Managing F   | 'artner                  |                                                   |  |
| Receipt For:                                                                              | Aggregate    | Year-to-Date ▼           |                                                   |  |
| Primary General  Other (specify) ▼                                                        |              | 462.00                   | P/R Deduction (\$77.00 Bi-Weekly)                 |  |
| Full Name (Last, First, Middle Initial)  C. Mr. Roman Hubbard                             |              |                          | Date of Receipt                                   |  |
| Mailing Address 111 Cobble Court                                                          |              |                          | 03 31 2016                                        |  |
| City                                                                                      | State        | Zip Code                 | Transaction ID : PR65681114206                    |  |
| Windsor                                                                                   | СО           | 80550-6137               | Amount of Each Receipt this Period                |  |
| FEC ID number of contributing federal political committee.                                | С            |                          | 84.94                                             |  |
| Name of Employer                                                                          | Memo Item    |                          |                                                   |  |
| New York Life Insurance Company                                                           | Managing F   | Partner                  |                                                   |  |
| Receipt For:                                                                              | Aggregate    | Year-to-Date ▼           |                                                   |  |
| Primary General  Other (specify) ▼                                                        |              | 242.82                   | P/R Deduction (\$42.47 Bi-Weekly)                 |  |
| SUBTOTAL of Receipts This Page (optional).                                                |              |                          | 323.88                                            |  |
| TOTAL This Period (last page this line numb                                               | er only)     | )                        |                                                   |  |

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Anthony R. Malloy Date of Receipt Mailing Address 329 Beechwood Road 2016 31 City Zip Code State Transaction ID: PR65814206 Ridgewood NJ 07450-2306 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation SMD, CEO - NYL Investors New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Sheila K. Davidson Date of Receipt Mailing Address 45 East Ninth Street Apt. 6/7 03 31 2016 City State Zip Code Transaction ID: PR65914206 NY New York 10003-6307 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Evp, CLO & General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34 Full Name (Last, First, Middle Initial) c. Mr. Charles W. Morris Date of Receipt Mailing Address 789 Rock Springs Road 03 31 2016 City Zip Code State Transaction ID: PR6598714206 TN Kingsport 37664-5265 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 283.34 Other (specify) 561.56 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 106 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Rychard F. Mysliwiec Date of Receipt Mailing Address 1693 Northgate Drive 2016 31 City Zip Code State Transaction ID: PR6697814206 PΑ Pittsburgh 15241-3221 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Gustavo Pizarro Date of Receipt Mailing Address 17811 Vail Street Apt. 20208 03 31 2016 City State Zip Code Transaction ID: PR6698814206 TX **Dallas** 75287-6475 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82 Full Name (Last, First, Middle Initial) c. Ms. Susan A. Thrope Date of Receipt Mailing Address 56 Random Farms Drive 03 31 2016 City Zip Code State Transaction ID: PR6707314206 NY Chappaqua 10514-1015 Amount of Each Receipt this Period FEC ID number of contributing С 153.86 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Svp, Deputy General Counsel & Secretar Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$76.93 Bi-Weekly) 461.58 Other (specify) 307.74 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 107 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Sonali Virendra Date of Receipt Mailing Address 32 Spruce Avenue 2016 31 City Zip Code State Transaction ID: PR6709614206 07630-1573 Emerson NJ Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Eric J. Grossman Date of Receipt Mailing Address 8310 35 Avenue Apt. 40 03 31 2016 City State Zip Code Transaction ID: PR6725614206 NY Jackson Heights 11372-5317 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82 Full Name (Last, First, Middle Initial) c. Mr. Christopher J. Viveiros Date of Receipt Mailing Address 3518 Colmar Quarter 03 31 2016 City Zip Code State Transaction ID: PR6918514206 Norfolk VA 23509-1247 Amount of Each Receipt this Period FEC ID number of contributing С 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) 384.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOR LINE NUMBER: PAGE 108 OF | 175 |  |  |  |  |
|------------------------------------------------|------------------------------|-----|--|--|--|--|
| Use separate schedule(s)                       | (check only one)             |     |  |  |  |  |
| for each category of the Detailed Summary Page | X 11a 11b 11c 12             |     |  |  |  |  |
|                                                | 13 14 15 16                  | 17  |  |  |  |  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. John T. Baier Date of Receipt Mailing Address 3415 North Ocean Drive #502 31 2016 City State Zip Code Transaction ID: PR69214206 FL 33019-3830 Hollywood Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Izhak Asher Date of Receipt Mailing Address 29 Center Drive 03 31 2016 City State Zip Code Transaction ID: PR6945714206 NY Roslyn 11576-1445 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Lloyd Pomerantz Date of Receipt Mailing Address 1675 York Avenue 03 31 2016 Aprtment 10L City Zip Code State Transaction ID: PR6945914206 NY New York 10128-6752 Amount of Each Receipt this Period

258.02

С

Agent

Occupation

Aggregate Year-to-Date ▼

FEC ID number of contributing

New York Life Insurance Company

Other (specify)

General

federal political committee.

Name of Employer

Primary

Receipt For:

91.34

Memo Item

P/R Deduction (\$91.34 Monthly)

FOR LINE NUMBER: PAGE 109 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Harris E. Kagan Date of Receipt Mailing Address 1608 Pandora Avenue 2016 31 City Zip Code State Transaction ID: PR6946214206 CA Los Angeles 90024-6114 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) 249.99 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Ari Fischman Date of Receipt Mailing Address 22920 Coventry Woods Lane 03 31 2016 City State Zip Code Transaction ID: PR6946314206 Southfield MI 48034-2108 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Leonard H. Isaacs Date of Receipt Mailing Address 66 Boulder Ridge Road 03 31 2016 City Zip Code State Transaction ID: PR6947114206 NY Scarsdale 10583-3150 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 433.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | F  | OR | LINE    | NU | <b>MBER</b> | : | PAGE | : 1 | 10 OF | 175 |
|------------------------------------------------|----|----|---------|----|-------------|---|------|-----|-------|-----|
| Use separate schedule(s)                       | (c | he | ck only | or | ne)         |   |      |     |       |     |
| for each category of the Detailed Summary Page |    | ×  | 11a     |    | 11b         |   | 11c  |     | 12    |     |
|                                                |    |    | 13      |    | 14          |   | 15   |     | 16    | 17  |

|                                                                  | nd Statements may not be sold or used by any per<br>g the name and address of any political committee |                                    |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------|
| NAME OF COMMITTEE (In Full)  New York Life Insurance Cor         | mpany Political Action Committee                                                                      |                                    |
| Full Name (Last, First, Middle Initial) Mr. Harvey G. Allison    |                                                                                                       | Date of Receipt                    |
| Mailing Address 6228 Wild Heron Way                              |                                                                                                       | 03 31 2016                         |
| City                                                             | State Zip Code                                                                                        | Transaction ID : PR6948314206      |
| College Grove                                                    | TN 37046-1406                                                                                         | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.       | C                                                                                                     | 116.00                             |
| Name of Employer                                                 | Occupation                                                                                            | Memo Item                          |
| New York Life Insurance Company                                  | Managing Partner                                                                                      |                                    |
| Receipt For:  Primary General  Other (specify) ▼                 | Aggregate Year-to-Date ▼  348.00                                                                      | P/R Deduction (\$58.00 Bi-Weekly)  |
| Full Name (Last, First, Middle Initial)  . Mr. Henry H. Cobb III | ,                                                                                                     | Date of Receipt                    |
| Mailing Address 8218 Longneedle Drive                            |                                                                                                       | 03 31 2016                         |
| City                                                             | State Zip Code                                                                                        | Transaction ID: PR6950814206       |
| Montgomery                                                       | AL 36117-5125                                                                                         | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.       | C                                                                                                     | 83.33                              |
| Name of Employer<br>New York Life Insurance Company              | Occupation Agent                                                                                      | - Memo Item                        |
| Receipt For:  Primary General  Other (specify) ▼                 | Aggregate Year-to-Date ▼  249.99                                                                      | P/R Deduction (\$83.33 Monthly)    |
| Full Name (Last, First, Middle Initial)  Mr. Chad W. Franks      |                                                                                                       | Date of Receipt                    |
| Mailing Address 2211 Dampton Drive                               |                                                                                                       | 03 31 2016 _                       |
| City                                                             | State Zip Code                                                                                        | Transaction ID : PR6951014206      |
| Frisco                                                           | TX 75033-6508                                                                                         | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.       | C                                                                                                     | 153.84                             |
| Name of Employer                                                 | Occupation                                                                                            | Memo Item                          |
| New York Life Insurance Company                                  | Managing Partner                                                                                      |                                    |
| Receipt For:                                                     |                                                                                                       | -                                  |
| Primary General Other (specify) ▼                                | Aggregate Year-to-Date ▼ 461.52                                                                       | P/R Deduction (\$76.92 Bi-Weekly)  |
|                                                                  | l)                                                                                                    | 353.17                             |
| This i office (last page this life hum                           |                                                                                                       |                                    |

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 111 OF 175 Use separate schedule(s)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                     | for each category of the<br>Detailed Summary Page                                      | X   11a                                                                                                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                                      |                                                                                        |                                                                                                                                                     |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                                                                                                                                                                                                            | any Political Action Committee                                                         |                                                                                                                                                     |
| Full Name (Last, First, Middle Initial)  Mr. Jeffrey Fitzpatrick  Mailing Address 103 Prospect Avenue  City Waterloo  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify)   | State Zip Code IA 50703-4241  C  Occupation Agent  Aggregate Year-to-Date ▼            | Date of Receipt    M                                                                                                                                |
| Full Name (Last, First, Middle Initial)  Mr. Gary Myers  Mailing Address 10825 Southwest 83rd Terrace  City  Augusta  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | e  State Zip Code KS 67010-8025  C  Occupation Agent  Aggregate Year-to-Date ▼  750.00 | Date of Receipt  03 31 2016  Transaction ID: PR6954314206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly)  |
| Full Name (Last, First, Middle Initial)  Mr. Brandon R. Paulseen  Mailing Address 13411 N Webb Road  City Wichita  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify)      | State Zip Code KS 67226-0000  C Occupation Agent Aggregate Year-to-Date ▼              | Date of Receipt  03 31 2016  Transaction ID : PR6954414206  Amount of Each Receipt this Period  100.00  Memo Item  P/R Deduction (\$100.00 Monthly) |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                            |                                                                                        | 433.34                                                                                                                                              |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                        | only)                                                                                  |                                                                                                                                                     |

FOR LINE NUMBER: PAGE 112 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Peter De La Rambelje Date of Receipt Mailing Address 9841 N Western Fork Trail 2016 31 City Zip Code State Transaction ID: PR6955814206 Tucson ΑZ 85742-8712 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$200.00 Monthly) 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Marc A. Bregman Date of Receipt Mailing Address 11701 E Kettleman Lane 03 31 2016 City State Zip Code Transaction ID: PR6957014206 CA Lodi 95240-9707 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Milo A. Abadilla Date of Receipt Mailing Address 3308 Moncucco Court 03 31 2016 City State Zip Code Transaction ID: PR6958314206 CA San Jose 95148-4348 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 113 OF 175 Use separate schedule(s)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                   | for each category of the<br>Detailed Summary Page                                   | X   11a                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                                                                                                                    |                                                                                     |                                                                                                                                                  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                                                                                                                         | any Political Action Committee                                                      |                                                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Ms. Bik Y. Tsang  Mailing Address 80 Elizabeth Street Apt. 3P  City New York  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company  Receipt For:  Primary General Other (specify) | State Zip Code NY 10013-5596  C Occupation Agent Aggregate Year-to-Date ▼           | Date of Receipt  03 31 2016  Transaction ID: PR70014206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly) |
| Full Name (Last, First, Middle Initial)  3. Ms. Chu Ling Hsiao  Mailing Address 19701 Northampton Drive  City                                                                                                                                                                      | State Zip Code                                                                      | Date of Receipt    M                                                                                                                             |
| Saratoga  FEC ID number of contributing federal political committee.  Name of Employer                                                                                                                                                                                             | CA 95070-3333  C Occupation                                                         | Amount of Each Receipt this Period  91.34  Memo Item                                                                                             |
| New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) ▼                                                                                                                                                                                                 | Agent Aggregate Year-to-Date ▼  266.02                                              | P/R Deduction (\$91.34 Monthly)                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. William F. Leisman III  Mailing Address 4 Orchard Avenue                                                                                                                                                                              |                                                                                     | Date of Receipt  03 31 2016                                                                                                                      |
| City Weston  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify)                                                                                                         | State Zip Code MA 02493-2219  C  Occupation Agent  Aggregate Year-to-Date ▼  750.00 | Transaction ID : PR7068014206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly)                           |
| SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                          | ·····                                                                               | 591.34                                                                                                                                           |
| TOTAL This Period (last page this line number                                                                                                                                                                                                                                      | only)                                                                               |                                                                                                                                                  |

FOR LINE NUMBER: PAGE 114 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Barbara A. Bobbin-Wilkinson Date of Receipt Mailing Address 210 Kelly Avenue 2016 31 City State Zip Code Transaction ID: PR7069814206 08087-2522 Tuckerton NJ Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Monthly) 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joel I. Steele Date of Receipt Mailing Address 22 Belmont Circle 03 31 2016 City State Zip Code Transaction ID: PR7070014206 NJ Columbus 08022-9714 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Jeffrey C. Williams Date of Receipt Mailing Address 317 Sharondale Drive 03 31 2016 City Zip Code State Transaction ID: PR7071114206 TX El Paso 79912-4257 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 250.00 Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 115 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Lee A. Kitzenberg Date of Receipt Mailing Address 96 Woodland Circle 2016 31 City Zip Code State Transaction ID: PR7126014206 MN Edina 55424-1453 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. William Van Winkle Date of Receipt Mailing Address 41 Breezy Point Road 03 31 2016 City State Zip Code Transaction ID: PR71714206 Little Silver NJ 07739-1703 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Michael Gisonda Date of Receipt Mailing Address 2402 Northwest 36th Street 03 31 2016 City Zip Code State Transaction ID: PR7175414206 FL Boca Raton 33431-5415 Amount of Each Receipt this Period FEC ID number of contributing С 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) 666.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 116 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. George R. Shadie Date of Receipt Mailing Address 57 Teaberry Drive Sand Springs 2016 31 City State Zip Code Transaction ID: PR72414206 PΑ 18222-2051 Drums Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jeffrey Varsa Date of Receipt Mailing Address 300 2nd Avenue Unit 3132 03 31 2016 City State Zip Code Transaction ID: PR7251814206 Needham MA 02494-2942 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Daniel Stoll Date of Receipt Mailing Address 16 Kingston Circle 03 31 2016 City Zip Code State Transaction ID: PR7251914206 NY Lockport 14094-5606 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 275.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

|                                                | FOR LINE NUMBER: | PAGE 117 OF 175 |
|------------------------------------------------|------------------|-----------------|
| Use separate schedule(s)                       | (check only one) |                 |
| for each category of the Detailed Summary Page | X 11a 11b 1      | 1c 12           |
|                                                | 13 14 1          | 5 16 17         |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Matthew S. Ferris Date of Receipt Mailing Address 100 Countryside Road Northwest 2016 31 City Zip Code State Transaction ID: PR7252614206 OH New Philadelphia 44663-1327 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Raouf S. Salib Date of Receipt Mailing Address 1221 Mill Creek Road 03 31 2016 City State Zip Code Transaction ID: PR7252914206 MI Flint 48532-2348 Amount of Each Receipt this Period FEC ID number of contributing 174.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$174.67 Monthly) Other (specify) 508.01 Full Name (Last, First, Middle Initial) **c.** Mr. Christopher O. Blunt Date of Receipt Mailing Address 9 Yarmouth Road 03 31 2016

| Receipt For:  Primary General  Other (specify) | Aggregate Year-to-Date ▼ 692.34 | P/R Deduction (\$115.39 Bi-Weekly) |
|------------------------------------------------|---------------------------------|------------------------------------|
| SUBTOTAL of Receipts This Page (optional)      |                                 | 505.45                             |
| FOTAL This Period (last page this line number  | only)                           |                                    |

Zip Code

Evp & President Investments Group

06853-1842

State

Occupation

CT

C

City

Norwalk

FEC ID number of contributing

New York Life Insurance Company

federal political committee.

Name of Employer

230.78

Transaction ID: PR7295714206

Amount of Each Receipt this Period

Memo Item

FOR LINE NUMBER: PAGE 118 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Scott L. Lenz Date of Receipt Mailing Address 41 Bellevue Avenue 2016 31 City Zip Code State Transaction ID: PR7295914206 Summit NJ 07901-2007 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation Vice President & Deputy General Counse New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Edward J. Fitzgerald Date of Receipt Mailing Address 181 Whitehall Boulevard 03 31 2016 City State Zip Code Transaction ID: PR7345514206 Garden City NY 11530-1337 Amount of Each Receipt this Period FEC ID number of contributing 88.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$44.00 Bi-Weekly) Other (specify) 252,00 Full Name (Last, First, Middle Initial) c. Mr. Fredric V. Collins Date of Receipt Mailing Address 1713 Monk Place 03 31 2016 City Zip Code State Transaction ID: PR7346314206 SC Mount Pleasant 29466-7016 Amount of Each Receipt this Period FEC ID number of contributing С 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 241.88 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 119 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Kevin L. Baumberger Date of Receipt Mailing Address 11715 N 178th Circle 2016 31 City Zip Code State Transaction ID: PR7347014206 ΝE 68007-5742 Bennington Amount of Each Receipt this Period FEC ID number of contributing 153.86 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$76.93 Bi-Weekly) 461.58 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Scott L. Berlin Date of Receipt Mailing Address 22 Jerome Road 03 31 2016 City State Zip Code Transaction ID: PR7347114206 NY Syosset 11791-3207 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34 Full Name (Last, First, Middle Initial) c. Mr. Irwin Silber Date of Receipt Mailing Address 16 Green Hill Lane 03 31 2016 City Zip Code State Transaction ID: PR7349414206 NY Spring Valley 10977-1607 Amount of Each Receipt this Period FEC ID number of contributing С 82.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Vice President & Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$41.00 Bi-Weekly) 240.00 Other (specify) 466.64 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

Other (specify)

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|                                                | FOR LINE NUMBER: PAGE | 120 OF 175 |
|------------------------------------------------|-----------------------|------------|
| Use separate schedule(s)                       | (check only one)      |            |
| for each category of the Detailed Summary Page | X 11a 11b 11c         | 12         |
|                                                | 13 14 15              | 16 17      |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Binh Q. Nguyen Date of Receipt Mailing Address 1575 Laurelwood Crossing Place 2016 31 City State Zip Code Transaction ID: PR7352314206 CA San Jose 95138-2753 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Peter J. McAvinn Date of Receipt Mailing Address 49 Fiske Road 03 31 2016 City State Zip Code Transaction ID: PR7414206 Wellesley MA 02481-3423 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly)

| Full Name (Last, First, Middle Initial)  Mr. Kyle Mostransky |                                 | Date of Receipt                    |
|--------------------------------------------------------------|---------------------------------|------------------------------------|
| Mailing Address 25 Sunnywoods Drive                          |                                 | 03 31 2016                         |
| City                                                         | State Zip Code                  | Transaction ID : PR7418814206      |
| Huntington Station                                           | NY 11746-4732                   | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.   | C                               | 91.34                              |
| Name of Employer                                             | Occupation                      | Memo Item                          |
| New York Life Insurance Company                              | Agent                           |                                    |
| Receipt For:  Primary General  Other (specify) ▼             | Aggregate Year-to-Date ▼ 258.02 | P/R Deduction (\$91.34 Monthly)    |

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

692.34

C.

552.90

FOR LINE NUMBER: PAGE 121 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Lawrence Carter Date of Receipt Mailing Address 2050 W.Warm Springs Road #1311 2016 31 City Zip Code State Transaction ID: PR7452414206 NV Henderson 89014-5529 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Zone Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mark P. Cereghino Date of Receipt Mailing Address 34 Algonquin Wood Place 03 31 2016 City State Zip Code Transaction ID: PR7471914206 MO Saint Louis 63122-2013 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.00 Monthly) Other (specify) 249,00 Full Name (Last, First, Middle Initial) **c.** Mr. John M. Angiulli Date of Receipt Mailing Address 1059 Old Orchard Drive 03 31 2016 City Zip Code State Transaction ID: PR74814206 PΑ Gibsonia 15044-6081 Amount of Each Receipt this Period FEC ID number of contributing С 135.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$135.00 Monthly) 385.00 Other (specify) 294.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 122 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Tema L. Steele Date of Receipt Mailing Address 4 Paige Court 2016 31 City Zip Code State Transaction ID: PR76414206 08002-2817 Cherry Hill NJ Amount of Each Receipt this Period FEC ID number of contributing 416.66 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$416.66 Monthly) 1249.98 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael T. Piotrowicz Date of Receipt Mailing Address 347 Stenton Avenue 03 31 2016 City State Zip Code Transaction ID: PR77714206 PA Plymouth Meeting 19462-1221 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Louis G. Villaume Date of Receipt Mailing Address 4500 Country Club Lane 03 31 2016 City Zip Code State Transaction ID: PR78014206 LA Lake Charles 70605-3963 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 766.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 123 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                                                                                                                                                                                                                                                    | for each category of the Detailed Summary Page                                                         | X 11a 11b 11c 12 13 14 15 16 17                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| or for commercial purposes, other than usin                                                                                                                                                                                                                                         | and Statements may not be sold or used by any per<br>g the name and address of any political committee |                                                                                                                                                  |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Co                                                                                                                                                                                                                             | mpany Political Action Committee                                                                       |                                                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Ms. Tessa Ingel  Mailing Address 817 22nd Street  City Santa Monica  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General                          | State Zip Code CA 90403-2008  C  Occupation Agent  Aggregate Year-to-Date ▼                            | Date of Receipt  03 31 2016  Transaction ID: PR79114206  Amount of Each Receipt this Period  100.00  Memo Item  P/R Deduction (\$100.00 Monthly) |
| Full Name (Last, First, Middle Initial)  Mr. Jeffrey A. Morrison  Mailing Address 1451 Radbill Circle  City  Berwyn  FEC ID number of contributing federal political committee.  Name of Employer                                                                                   | State Zip Code PA 19312-2502  C Occupation                                                             | Date of Receipt  03 31 2016  Transaction ID: PR79614206  Amount of Each Receipt this Period  83.34  Memo Item                                    |
| New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                   | Agent  Aggregate Year-to-Date ▼  250.02                                                                | P/R Deduction (\$83.34 Monthly)                                                                                                                  |
| Full Name (Last, First, Middle Initial)  Mr. Joseph A. Auteri  Mailing Address 160 Cheswold Valley Ro  City Haverford  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary General Other (specify) | State Zip Code PA 19041-1816  C  Occupation Agent  Aggregate Year-to-Date ▼                            | Date of Receipt  03 31 2016  Transaction ID: PR79714206  Amount of Each Receipt this Period  250.00  Memo Item  P/R Deduction (\$250.00 Monthly) |
| SUBTOTAL of Receipts This Page (optional                                                                                                                                                                                                                                            | al)                                                                                                    | 433.34                                                                                                                                           |
| TOTAL This Period (last page this line num                                                                                                                                                                                                                                          | nber only)                                                                                             |                                                                                                                                                  |

FOR LINE NUMBER: PAGE 124 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. John Rocco Date of Receipt Mailing Address 16 Midland Road 2016 31 City Zip Code State Transaction ID: PR8014206 Lynnfield MA 01940-1265 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Terrence L. Wolf Date of Receipt Mailing Address 119 Great Circle Road 03 31 2016 City State Zip Code Transaction ID: PR81714206 PA Landenberg 19350-9110 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$175.00 Monthly) Other (specify) 509.00 Full Name (Last, First, Middle Initial) c. Mr. Ronald D. Jones Date of Receipt Mailing Address 1261 Lake Vue Drive 03 31 2016 City State Zip Code Transaction ID: PR83814206 PΑ Butler 16002-7625 Amount of Each Receipt this Period FEC ID number of contributing С 83.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.00 Monthly) 233.00 Other (specify) 508.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 125 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Larry Catlos Date of Receipt Mailing Address 2718 Rebecca Street 2016 31 City Zip Code State Transaction ID: PR83914206 PΑ Indiana 15701-2337 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 216.68 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Robert P. Ducato Date of Receipt Mailing Address 10 Franklin Street 03 31 2016 City State Zip Code Transaction ID: PR84314206 Westfield NY 14787-1009 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Bernard F. Zaleski Date of Receipt Mailing Address 9461 E Cross Creek Circle 03 31 2016 City Zip Code State Transaction ID: PR8491814206 KS Wichita 67206-4063 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 283.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: PAGE 126 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Michael S. Anderson Date of Receipt Mailing Address 29002 Acanthus Court 2016 31 City Zip Code State Transaction ID: PR8492714206 CA Agoura 91301-1629 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Monthly) 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Hershey Mittelman Date of Receipt Mailing Address 1219 56th Street 03 31 2016 City State Zip Code Transaction ID: PR8493014206 NY Brooklyn 11219-4560 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Ms. Chantal Joseph Date of Receipt Mailing Address 39 Fountain Place Apt. 2F 03 31 2016 City Zip Code State Transaction ID: PR8493614206 NY New Rochelle 10801-6566 Amount of Each Receipt this Period FEC ID number of contributing С 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) 258.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOR LINE NUMBER:   PAGE 127 OF | 175 |
|------------------------------------------------|--------------------------------|-----|
| Use separate schedule(s)                       | (check only one)               |     |
| for each category of the Detailed Summary Page | X 11a 11b 11c 12               |     |
|                                                | 13 14 15 16                    | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Matthew E. Vahl Date of Receipt Mailing Address 1419 Pine Cove Court 31 2016 City State Zip Code Transaction ID: PR8497614206 Darien IL 60561-4999 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Corporate Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jenkins Mikell III Date of Receipt Mailing Address 8 Lord Nelson Court 03 31 2016 City State Zip Code Transaction ID: PR8531814206 SC Columbia 29209-1910 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Phillip R. Whitehead Date of Receipt Mailing Address 145 Woodland Greens Drive 03 31 2016 City Zip Code State Transaction ID: PR8532514206 MS Brandon 39047-8773 Amount of Each Receipt this Period FEC ID number of contributing С 75.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Monthly) 225.00 Other (specify) 389.12 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. John T. Richards Date of Receipt Mailing Address 5801 Papaya Place Northeast 2016 31 City Zip Code State Transaction ID: PR8532614206 NM Albuquerque 87111-6223 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brian J. Winter Date of Receipt Mailing Address 1513 Oxford Road 03 31 2016 City State Zip Code Transaction ID: PR8532714206 NY Wantagh 11793-2445 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.00 Monthly) Other (specify) 450,00 Full Name (Last, First, Middle Initial) c. Mr. Michael P. Lackey Date of Receipt Mailing Address 25 Zaitz Farm Road 03 31 2016 City Zip Code State Transaction ID: PR8535014206 NJ Princeton Junction 08550-3314 Amount of Each Receipt this Period FEC ID number of contributing С 124.00 federal political committee. Memo Item Name of Employer Occupation Vice President New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$62.00 Bi-Weekly) 359.10 Other (specify) 357.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Joel M. Steinberg Date of Receipt Mailing Address 44 Spruce Street 2016 31 City Zip Code State Transaction ID: PR85514206 Princeton Junction NJ 08550-2019 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation Svp, Chief Risk Officer & Chief Actuar New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David R. Walsh Date of Receipt Mailing Address 150 Vista Grande 03 31 2016 City State Zip Code Transaction ID: PR8614206 CA Greenbrae 94904-1135 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Thomas F. English Date of Receipt Mailing Address 27 Hedge Brook Lane 03 31 2016 City Zip Code State Transaction ID: PR86314206 CT Stamford 06903-2029 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Svp, Deputy GC & Chief Insurance Couns Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) 300.00 Other (specify) 580.78 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOR LINE NUMBER: | PAGE 130 | 0 OF 175 |
|------------------------------------------------|------------------|----------|----------|
| Use separate schedule(s)                       | (check only one) |          |          |
| for each category of the Detailed Summary Page | X 11a 11b        | 11c 1    | 2        |
|                                                | 13 14            | 15 1     | 6 17     |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Scott F. Della Penna Date of Receipt Mailing Address 9541 Purcell Drive 2016 31 City Zip Code State Transaction ID: PR86714206 MD Potomac 20854-4500 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 692.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John J. O'Gara Date of Receipt Mailing Address 8 Rock Ridge Court 03 31 2016 City State Zip Code Transaction ID: PR8709114206 New Fairfield CT 06812-3300 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34 Full Name (Last, First, Middle Initial) c. Mr. Dale C. Berry Date of Receipt Mailing Address 2008 Falls Forest Drive 03 31 2016 City Zip Code State Transaction ID: PR8712014206 NC Raleigh 27615-1258 Amount of Each Receipt this Period

230.82

С

Occupation

Managing Partner

Aggregate Year-to-Date ▼

FEC ID number of contributing

New York Life Insurance Company

Other (specify)

General

federal political committee.

Name of Employer

Primary

Receipt For:

76.94

Memo Item

P/R Deduction (\$38.47 Bi-Weekly)

FOR LINE NUMBER: PAGE 131 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Kyle W. Jahng Date of Receipt Mailing Address 404 Heathermoor Drive 2016 31 City Zip Code State Transaction ID: PR8712414206 TN Knoxville 37934-2559 Amount of Each Receipt this Period FEC ID number of contributing C 134.65 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$76.94 Bi-Weekly) 365.49 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Alison H. Micucci Date of Receipt Mailing Address 16 Munsey Road 03 31 2016 City State Zip Code Transaction ID: PR8755914206 NJ 07630-1512 Emerson Amount of Each Receipt this Period FEC ID number of contributing 210.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$105.00 Bi-Weekly) Other (specify) 610,00 Full Name (Last, First, Middle Initial) c. Mr. Roy E. Stachnik Date of Receipt Mailing Address 321 Shadow Lake Court 03 31 2016 City Zip Code State Transaction ID: PR8806014206 CO **Grand Junction** 81507-1672 Amount of Each Receipt this Period FEC ID number of contributing С 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) 511.32 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 132 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Jason M. Apolenis Date of Receipt Mailing Address 9125 Kittery Lane 2016 31 City Zip Code State Transaction ID: PR8806314206 MD Bethesda 20817-2152 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Richard C. Schwartz Date of Receipt Mailing Address 744 High Woods Drive 03 31 2016 City State Zip Code Transaction ID: PR8806514206 Franklin Lakes NJ 07417-2272 Amount of Each Receipt this Period FEC ID number of contributing 153.86 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$76.93 Bi-Weekly) Other (specify) 461,58 Full Name (Last, First, Middle Initial) c. Mr. Milton A. Dugger Jr. Date of Receipt Mailing Address 904 Dartmouth Road 03 31 2016 City Zip Code State Transaction ID: PR88414206 MD **Baltimore** 21212-3225 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 503.86 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 133 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Margarita Abadilla Date of Receipt Mailing Address 3308 Moncucco Court 2016 31 City Zip Code State Transaction ID: PR8894714206 CA San Jose 95148-4348 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Memo Item Name of Employer Occupation Senior Partner New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$96.15 Bi-Weekly) 576.90 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Christopher C. Battersby Date of Receipt Mailing Address 51 Mitchell Road 03 31 2016 City State Zip Code Transaction ID: PR8976614206 Holliston MA 01746-2469 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) Other (specify) 500,01 Full Name (Last, First, Middle Initial) **c.** Mr. Michael A. Berardi Date of Receipt Mailing Address 240 Barnsley Avenue 03 31 2016 State Zip Code Transaction ID: PR8993614206 PΑ **Huntingdon Valley** 19006-6504 Amount of Each Receipt this Period FEC ID number of contributing С 125.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$125.00 Monthly) 350.00 Other (specify) 483.97 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 134 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                            |                                                                      | Summary Page X 11a 13                | 11b 11c 12<br>14 15 16 17                          |
|-------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------|----------------------------------------------------|
|                                                             | Reports and Statements may not be standard the name and address of a | old or used by any person for the po | ourpose of soliciting contributions                |
| NAME OF COMMITTEE (In Full New York Life Insurar            | )<br>ace Company Political Acti                                      | n Committee                          |                                                    |
| Full Name (Last, First, Middle I<br>Mr. Toby Bishop         |                                                                      | Date of F                            | Receipt                                            |
| Mailing Address 8776 Boulder F                              |                                                                      | 03                                   | 31 2016                                            |
| City<br>Eden Prairie                                        | State Zip Co<br>MN 55347                                             | 0440                                 | of Each Receipt this Period                        |
| FEC ID number of contributing federal political committee.  | C                                                                    |                                      | 230.76                                             |
| Name of Employer  New York Life Insurance Compa             | Occupation  Managing Partner                                         | Mem                                  | no Item                                            |
| Receipt For:  Primary General  Other (specify) ▼            | Aggregate Year-to-Da                                                 |                                      | ction (\$115.38 Bi-Weekly)                         |
| Full Name (Last, First, Middle I<br>Mr. Clayton Blanton Jr. | nitial)                                                              | Date of F                            | Receipt                                            |
| Mailing Address 3775 Prescott                               |                                                                      | M = M 03                             | 31 2016                                            |
| Clovis                                                      | State Zip Co<br>CA 93619                                             | Transac                              | ction ID: PR9012114206 of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                                                                    |                                      | 100.00                                             |
| Name of Employer<br>New York Life Insurance Compa           | Occupation Agent                                                     | Mem                                  | no Item                                            |
| Receipt For:  Primary General  Other (specify) ▼            | Aggregate Year-to-Da                                                 |                                      | ction (\$100.00 Monthly)                           |
| Full Name (Last, First, Middle I<br>Mr. Robert Ostberg      |                                                                      | Date of F                            | Receipt                                            |
| Mailing Address 48 Greenleaf D                              |                                                                      | M - M 03                             | 31 2016                                            |
| City<br>Northampton                                         | State Zip Co<br>MA 01062                                             | 0700                                 | of Each Receipt this Period                        |
| FEC ID number of contributing federal political committee.  | C                                                                    |                                      | 250.00                                             |
| Name of Employer                                            | Occupation                                                           | Mem                                  | no Item                                            |
| New York Life Insurance Compa                               | Agent Aggregate Year-to-Da                                           |                                      |                                                    |
| Primary General Other (specify) ▼                           | Aggregate Teal-10-Da                                                 |                                      | ction (\$250.00 Monthly)                           |
| SUBTOTAL of Receipts This Pag                               | e (optional)                                                         |                                      | 580.76                                             |

FOR LINE NUMBER: PAGE 135 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Edward H. Bobbitt Date of Receipt Mailing Address 2432 Southwest 33rd Circle 2016 31 City Zip Code State Transaction ID: PR9016114206 FL Okeechobee 34974-5724 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jesse Bond Date of Receipt Mailing Address 20122 Richmond Beach Dr. NW 03 31 2016 City State Zip Code Transaction ID: PR9021814206 WA Shoreline 98177-2436 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Carroll D. Carson Jr. Date of Receipt Mailing Address 689 Forrest Haven Court 03 31 2016 City Zip Code State Transaction ID: PR9103114206 SC Greenville 29609-6522 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 583.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 136 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Felix S. Chu Date of Receipt Mailing Address 11 Mercury Court 2016 31 City State Zip Code Transaction ID: PR9144214206 CA Pleasant Hill 94523-2167 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Rosanne S. Gentile Date of Receipt Mailing Address 606 S Payne Street 03 31 2016 City State Zip Code Transaction ID: PR91714206 VA Alexandria 22314-3928 Amount of Each Receipt this Period FEC ID number of contributing 108.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$108.00 Monthly) Other (specify) 316.00 Full Name (Last, First, Middle Initial) c. Mr. Gordon E. Parker Jr. Date of Receipt Mailing Address 422 Discovery Road 03 31 2016 Zip Code State Transaction ID: PR91814206 Virginia Beach VA 23451-2157 Amount of Each Receipt this Period FEC ID number of contributing С 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) 358.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 137 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. David Cruz Date of Receipt Mailing Address 98 Thackeray Road 2016 31 City Zip Code State Transaction ID: PR9197814206 Oakland NJ 07436-3319 Amount of Each Receipt this Period FEC ID number of contributing C 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Anthony D. Curcio Date of Receipt Mailing Address 10 Debra Drive 03 31 2016 City State Zip Code Transaction ID: PR9202914206 VT **Essex Junction** 05452-3414 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Bi-Weekly) Other (specify) 240,00 Full Name (Last, First, Middle Initial) c. Mr. Michael T. Damon Date of Receipt Mailing Address 3 Newton Lane 03 31 2016 City Zip Code State Transaction ID: PR9211414206 MA Medway 02053-6161 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 406.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 138 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Scott K. McGuire Date of Receipt Mailing Address 1983 Woodlake Drive 2016 31 City State Zip Code Transaction ID: PR92114206 71006-9305 Benton LA Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Lee R. Dean Date of Receipt Mailing Address 10 Butler Road 03 31 2016 City State Zip Code Transaction ID: PR9226214206 Sudbury MA 01776-1514 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) c. Mr. Dean Diamond Date of Receipt Mailing Address 1204 Tullamore Circle 03 31 2016 City State Zip Code Transaction ID: PR9245814206 PΑ **Chester Springs** 19425-1214 Amount of Each Receipt this Period FEC ID number of contributing С 76.92 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 230.76 Other (specify) 260.26 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 139 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Vladimir Donets Date of Receipt Mailing Address 2405 Ruby Court 2016 31 City Zip Code State Transaction ID: PR9260914206 CA Rocklin 95677-4224 Amount of Each Receipt this Period FEC ID number of contributing 166.67 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$166.67 Monthly) 500.01 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael P. Downey Date of Receipt Mailing Address 67 Haller Drive 03 31 2016 City State Zip Code Transaction ID: PR9267814206 Cedar Grove NJ 07009-1704 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Associate Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82 Full Name (Last, First, Middle Initial) c. Mr. Zach J. Engraff Date of Receipt Mailing Address 2294 Dogwood Drive 03 31 2016 Zip Code City State Transaction ID: PR9299514206 CO Erie 80516-7932 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) 343.61 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 140 OF Use separate schedule(s) (check only one)

| TEMIZED RECEIPTS                                                                                                                                                                     | for each category of the Detailed Summary Page                                                           | X   11a                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and S or for commercial purposes, other than using the                                                                                      |                                                                                                          |                                                                                                                        |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Compa                                                                                                                           | any Political Action Committee                                                                           | •                                                                                                                      |
| Full Name (Last, First, Middle Initial) Mr. A. David Erland  Mailing Address 23813 Northeast 27th Street  City Sammamish  FEC ID number of contributing federal political committee. | State Zip Code<br>WA 98074-5485                                                                          | Date of Receipt  03 31 2016  Transaction ID: PR9301914206  Amount of Each Receipt this Period  153.86                  |
| Name of Employer  New York Life Insurance Company  Receipt For:  Primary General  Other (specify) ▼                                                                                  | Occupation Senior Partner  Aggregate Year-to-Date ▼  461.58                                              | P/R Deduction (\$76.93 Bi-Weekly)                                                                                      |
| Full Name (Last, First, Middle Initial)  Mr. David Felte  Mailing Address 123 Keppel Way  City                                                                                       | State Zip Code                                                                                           | Date of Receipt    M                                                                                                   |
| Cotati  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company                                                                 | CA 94931-5363  C Occupation Agent                                                                        | Amount of Each Receipt this Period  83.34  Memo Item                                                                   |
| Receipt For:  Primary General  Other (specify) ▼                                                                                                                                     | Aggregate Year-to-Date ▼ 250.02                                                                          | P/R Deduction (\$83.34 Monthly)                                                                                        |
| Full Name (Last, First, Middle Initial)  Mr. Theodore A. Mathas  Mailing Address 8 Carriage Trail                                                                                    |                                                                                                          | Date of Receipt  03 31 2016                                                                                            |
| City Tarrytown  FEC ID number of contributing federal political committee.  Name of Employer New York Life Insurance Company Receipt For: Primary General                            | State Zip Code NY 10591-6306  C  Occupation Chairman & Chief Executive Officer  Aggregate Year-to-Date ▼ | Transaction ID : PR93214206  Amount of Each Receipt this Period  230.78  Memo Item  P/R Deduction (\$115.39 Bi-Weekly) |
| Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)                                                                                                                         | 692.34                                                                                                   | 467.98                                                                                                                 |
| TOTAL This Period (last page this line number                                                                                                                                        | only)                                                                                                    |                                                                                                                        |

FOR LINE NUMBER: PAGE 141 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Terry G. Fenwick Date of Receipt Mailing Address 2309 Stannye Drive 2016 31 City Zip Code State Transaction ID: PR9321814206 Louisville KY 40222-6351 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.33 Monthly) 249.99 Other (specify) Full Name (Last, First, Middle Initial) **B.** Ms. Cynthia S. Fox Date of Receipt Mailing Address 1114 Sunset Drive 03 31 2016 City State Zip Code Transaction ID: PR9348714206 WI Kimberly 54136-1234 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$175.00 Monthly) Other (specify) 350,00 Full Name (Last, First, Middle Initial) c. Mr. Nicholas A. Garry Date of Receipt Mailing Address 2404 S 3rd Avenue 03 31 2016 City Zip Code State Transaction ID: PR9378214206 SD Sioux Falls 57105-3915 Amount of Each Receipt this Period FEC ID number of contributing С 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) 341.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: PAGE 142 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. F. Courtney Hoge Date of Receipt Mailing Address 3027 Golf Colony Drive 2016 31 City Zip Code State Transaction ID: PR93814206 VA Salem 24153-6833 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jerome C. Prentice Date of Receipt Mailing Address 6003 Wilmington Drive 03 31 2016 City State Zip Code Transaction ID: PR94214206 VA Burke 22015-3823 Amount of Each Receipt this Period FEC ID number of contributing 92.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$92.00 Monthly) Other (specify) 267.34 Full Name (Last, First, Middle Initial) c. Mr. Otto N. Grozinger Date of Receipt Mailing Address 10035 Winding Ridge Drive 03 31 2016 City Zip Code State Transaction ID: PR9434214206 Shreveport LA 71106-7685 Amount of Each Receipt this Period FEC ID number of contributing С 91.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$91.34 Monthly) 258.02 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 143 OF Use separate schedule(s) (check only one)

| <b> </b>   | EMIZED RECEIPTS                                                                                                                                                                                                                                                            |                                               | for each category of the<br>Detailed Summary Page | X 11a 11b 11c 12<br>13 14 15 16 17                                                                                                                 |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
|            | ry information copied from such Reports and Sta<br>for commercial purposes, other than using the r                                                                                                                                                                         |                                               |                                                   |                                                                                                                                                    |
| $\rangle$  | NAME OF COMMITTEE (In Full)  New York Life Insurance Compar                                                                                                                                                                                                                | ny Politio                                    | cal Action Committee                              |                                                                                                                                                    |
| Δ.         | Receipt For:  Primary General  Other (specify) ▼                                                                                                                                                                                                                           | State OH  C  Occupation Agent  Aggregate      | Zip Code<br>44022-2380<br>Year-to-Date ▼          | Date of Receipt  03 31 2016  Transaction ID: PR9450814206  Amount of Each Receipt this Period  100.00  Memo Item  P/R Deduction (\$100.00 Monthly) |
| 3.         | Now York Life Incurance Company                                                                                                                                                                                                                                            | State CO C Occupation Agent                   | Zip Code<br>80123-3508                            | Date of Receipt  03 31 2016  Transaction ID: PR9530514206  Amount of Each Receipt this Period  83.34  Memo Item                                    |
|            | Primary General Other (specify) ▼                                                                                                                                                                                                                                          | Aggregate                                     | Year-to-Date ▼ 250.02                             | P/R Deduction (\$83.34 Monthly)                                                                                                                    |
| <b>D</b> . | Full Name (Last, First, Middle Initial)  Mr. David R. Hughes  Mailing Address 1480 Cole Lane  City  Upland  FEC ID number of contributing federal political committee.  Name of Employer  New York Life Insurance Company  Receipt For:  Primary  General  Other (specify) | State CA  C  Occupation Managing P  Aggregate |                                                   | Date of Receipt  M. M. J.                                                                                      |
| S          | SUBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                  |                                               | ·····                                             | 337.20                                                                                                                                             |
| т          | OTAL This Period (last page this line number or                                                                                                                                                                                                                            | nlv)                                          |                                                   |                                                                                                                                                    |

FOR LINE NUMBER: PAGE 144 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Brian M. Hutt Date of Receipt Mailing Address 9612 Pinkney Court 2016 31 City Zip Code State Transaction ID: PR9540014206 MD Potomac 20854-4332 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$125.00 Monthly) 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Timothy D. Hutto Date of Receipt Mailing Address 500 Throckmorton Street #805 03 31 2016 City State Zip Code Transaction ID: PR9540314206 Fort Worth TX 76102-3733 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) Other (specify) 253,88 Full Name (Last, First, Middle Initial) **c.** Mr. Gerald S. Jackson Date of Receipt Mailing Address 2629 Northwest Three Sisters Drive 03 31 2016 City Zip Code State Transaction ID: PR9552014206 OR Bend 97703-5608 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 275.00 Other (specify) 325.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOF  | R LINE  | NU | IMBER | : | PAGE | : 1 | 45 OF | 1 | 17 |
|------------------------------------------------|------|---------|----|-------|---|------|-----|-------|---|----|
| Use separate schedule(s)                       | (che | ck only | or | ne)   |   |      |     |       |   |    |
| for each category of the Detailed Summary Page | X    | 11a     |    | 11b   |   | 11c  |     | 12    |   |    |
|                                                |      | 13      |    | 14    |   | 15   |     | 16    |   | 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Bradley D. Johnson Date of Receipt Mailing Address 5855 Elkhorn Lane 31 2016 City Zip Code State Transaction ID: PR9572914206 CA Santa Maria 93455-6000 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$125.00 Monthly) 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David F. Keefe Date of Receipt Mailing Address 116 Mill Street 03 31 2016 City State Zip Code Transaction ID: PR9611414206 MA **Newton Center** 02459-1127 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Mr. Gerald F. Hall Date of Receipt Mailing Address 15 Fieldstone Drive 03 31 2016 City Zip Code State Transaction ID: PR9614206

P/R Deduction (\$91.34 Monthly) 258.02 Other (specify) 316.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

02790-2634

MA

Occupation

Aggregate Year-to-Date ▼

С

Agent

Westport

FEC ID number of contributing

New York Life Insurance Company

General

federal political committee.

Name of Employer

Primary

Receipt For:

91.34

Amount of Each Receipt this Period

Memo Item

FOR LINE NUMBER: PAGE 146 OF 175

| Use separate schedule(s) for each category of the Detailed Summary Page | (check only one)         X       11a       11b       11c       12         13       14       15       16 | 17 |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|----|
| <br>                                                                    | 6 11 11 11 11 11                                                                                        |    |

Any information copied from such Beports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| Full Name (Last, First, Middle Initial) Mr. Richard G. Kelly Mailing Address 32 Marlboro Street |                                         | Date of Receipt                           |
|-------------------------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------------|
| City                                                                                            | State Zip Code                          | 03 31 2016 Transaction ID : PR9615614206  |
| Norwood                                                                                         | MA 02062-1212                           | Amount of Each Receipt this Period        |
| FEC ID number of contributing federal political committee.                                      | C                                       | 83.34 Memo Item                           |
| Name of Employer                                                                                | Occupation                              | Memoricin                                 |
| New York Life Insurance Company Receipt For:  Primary General  Other (specify) ▼                | Agent  Aggregate Year-to-Date ▼  250.02 | P/R Deduction (\$83.34 Monthly)           |
| Full Name (Last, First, Middle Initial) Ms. Gail A. Kincannon                                   |                                         | Date of Receipt                           |
| Mailing Address 11712 Emerald Falls Drive                                                       | 9                                       | M M / D D / Y Y Y Y                       |
| City Austin                                                                                     | State Zip Code TX 78738-5329            | 03 31 2016 Transaction ID : PR9630614206  |
| FEC ID number of contributing federal political committee.                                      | C 70730-3323                            | Amount of Each Receipt this Period        |
| Name of Employer<br>New York Life Insurance Company                                             | Occupation Agent                        | Memo Item                                 |
| Receipt For:  Primary General  Other (specify) ▼                                                | Aggregate Year-to-Date ▼ 350.00         | P/R Deduction (\$125.00 Monthly)          |
| Full Name (Last, First, Middle Initial) Mr. Mark B. Kline                                       |                                         | Date of Descipt                           |
| Mailing Address 145 Robert E Lee Blvd. S                                                        | tte. 310                                | Date of Receipt  03 31 2016               |
| City New Orleans                                                                                | State Zip Code<br>LA 70124-2574         | Transaction ID : PR9637714206             |
| FEC ID number of contributing                                                                   | C                                       | Amount of Each Receipt this Period 250.00 |
| federal political committee.                                                                    |                                         | — Memo Item                               |
| Name of Employer  New York Life Insurance Company                                               | Occupation Agent                        |                                           |
| Receipt For:  Primary  General  Other (specify)                                                 | Aggregate Year-to-Date ▼  750.00        | P/R Deduction (\$250.00 Monthly)          |

FOR LINE NUMBER: PAGE 147 OF 175 Use separate schedule(s) (check only one) X 11a 11b 12 11c 14 13 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Dominick M. Kortkamp Date of Receipt Mailing Address 31 Hill Lane 2016 31 City Zip Code State Transaction ID: PR9649314206 NY Roslyn Heights 11577-2611 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) 384.66 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. James E. Adkins Jr. Date of Receipt Mailing Address 10200 Wendover Drive 03 31 2016 City State Zip Code Transaction ID: PR96514206 VA Vienna 22181-2960 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) **c.** Ms. Agnes Lam Date of Receipt Mailing Address 7131 Calla Pass 03 31 2016 City Zip Code State Transaction ID: PR9668314206 WI Middleton 53562-1072 Amount of Each Receipt this Period FEC ID number of contributing С 115.38 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$57.69 Bi-Weekly) 346.14 Other (specify) 596.16 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOR LINE NUMBER: | PAGE | 148 OF            | 175 |  |  |  |  |  |
|------------------------------------------------|------------------|------|-------------------|-----|--|--|--|--|--|
| Use separate schedule(s)                       | (check only one) |      |                   |     |  |  |  |  |  |
| for each category of the Detailed Summary Page | X 11a 11b        | 11c  | 12                |     |  |  |  |  |  |
|                                                | 13 14            | 15   | ີ <sub>16</sub> Γ | 17  |  |  |  |  |  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Edward D. Langley Date of Receipt Mailing Address 19069 Greenleaf Circle 31 2016 City State Zip Code Transaction ID: PR9674414206 Ponchatoula LA 70454-5274 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jason Leonard Date of Receipt Mailing Address 9 Kings View 03 31 2016 City State Zip Code Transaction ID: PR9704814206 TX San Antonio 78257-1718 Amount of Each Receipt this Period FEC ID number of contributing 230.78 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.39 Bi-Weekly) Other (specify) 692.34

Full Name (Last, First, Middle Initial) c. Mr. Paul A. Lewis Date of Receipt Mailing Address PO Box 581 03 31 2016 City Zip Code State Transaction ID: PR9712614206 CA Lockeford 95237-0581 Amount of Each Receipt this Period FEC ID number of contributing С 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) 250.02 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9

564.12

FOR LINE NUMBER: PAGE 149 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Daniel Kunhardt Jr. Date of Receipt Mailing Address 11 Madison Circle 2016 31 City Zip Code State Transaction ID: PR9714206 Greenfield MA 01301-2703 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jerry H. Lorey Date of Receipt Mailing Address 10690 Goldsberry Road 03 31 2016 City State Zip Code Transaction ID: PR9740114206 LA Shreveport 71106-8345 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Minde Lu Date of Receipt Mailing Address 86-06 Avon Street 03 31 2016 City Zip Code State Transaction ID: PR9744714206 NY Jamaica 11432-3135 Amount of Each Receipt this Period FEC ID number of contributing С 76.92 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 230.76 Other (specify) 576.92 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                | FOF  | R LINE           | NU | MBER | : | PAGE | : 1 | 50 OF |  | 175 |
|------------------------------------------------|------|------------------|----|------|---|------|-----|-------|--|-----|
| Use separate schedule(s)                       | (che | (check only one) |    |      |   |      |     |       |  |     |
| for each category of the Detailed Summary Page | X    | 11a              |    | 11b  |   | 11c  |     | 12    |  |     |
| ,,g.                                           |      | 13               |    | 14   |   | 15   |     | 16    |  | 17  |

| Any information copied from such Reports and or for commercial purposes, other than using the       | Statements may not be sold or used by any pers e name and address of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)  New York Life Insurance Comp                                           | pany Political Action Committee                                                                 |                                                                                             |
| Full Name (Last, First, Middle Initial)  Mr. Eugene R. Lutz  Mailing Address 113 Prock Street       |                                                                                                 | Date of Receipt                                                                             |
| Mailing Address 112 Brook Street                                                                    | 01.1. 7. 0. 1                                                                                   | 03 31 2016                                                                                  |
| City<br>Garden City                                                                                 | State Zip Code<br>NY 11530-6404                                                                 | Transaction ID : PR9750114206  Amount of Each Receipt this Period                           |
| FEC ID number of contributing federal political committee.                                          | C                                                                                               | 76.94                                                                                       |
| Name of Employer  New York Life Insurance Company  Receipt For:                                     | Occupation  Managing Partner                                                                    | Memo Item                                                                                   |
| Primary General Other (specify) ▼                                                                   | Aggregate Year-to-Date ▼  230.82                                                                | P/R Deduction (\$38.47 Bi-Weekly)                                                           |
| Full Name (Last, First, Middle Initial)  B. Mr. Brian G. Madgett  Moiling Address (1997, 1999, 141) |                                                                                                 | Date of Receipt                                                                             |
| Mailing Address 4607 102nd Lane Northeast                                                           | 7.01                                                                                            | 03 31 2016                                                                                  |
| City<br>Kirkland                                                                                    | State Zip Code<br>WA 98033-7646                                                                 | Transaction ID : PR9757214206  Amount of Each Receipt this Period                           |
| FEC ID number of contributing federal political committee.                                          | C                                                                                               | 76.94                                                                                       |
| Name of Employer  New York Life Insurance Company                                                   | Occupation Vice President                                                                       | Memo Item                                                                                   |
| Receipt For:  Primary General  Other (specify) ▼                                                    | Aggregate Year-to-Date ▼  230.82                                                                | P/R Deduction (\$38.47 Bi-Weekly)                                                           |
| Full Name (Last, First, Middle Initial)  C. Mr. William B. Mangano                                  |                                                                                                 | Date of Receipt                                                                             |
| Mailing Address 8143 Bendemeer Drive                                                                |                                                                                                 | 03 31 2016                                                                                  |
| City<br>Poland                                                                                      | State Zip Code<br>OH 44514-2736                                                                 | Transaction ID : PR9769414206  Amount of Each Receipt this Period                           |
| FEC ID number of contributing federal political committee.                                          | C                                                                                               | 100.00                                                                                      |
| Name of Employer                                                                                    | Occupation                                                                                      | Memo Item                                                                                   |
| New York Life Insurance Company  Receipt For:  □ Primary □ General  Other (specify) ▼               | Agent  Aggregate Year-to-Date ▼  300.00                                                         | P/R Deduction (\$100.00 Monthly)                                                            |
| SUBTOTAL of Receipts This Page (optional)                                                           |                                                                                                 | 253.88                                                                                      |
| TOTAL This Period (last page this line number                                                       | <u>*</u>                                                                                        |                                                                                             |

FOR LINE NUMBER: PAGE 151 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ms. Maria J. Mauceri Date of Receipt Mailing Address 152 E 94th Street 2016 Apt. 5G 31 City Zip Code State Transaction ID: PR9797414206 NY New York 10128-2575 Amount of Each Receipt this Period FEC ID number of contributing 230.76 federal political committee. Memo Item Name of Employer Occupation Vice President & Actuary New York Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$115.38 Bi-Weekly) 692.28 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Richard C. Maus Date of Receipt Mailing Address 5762 Berkshire Lane 03 31 2016 City State Zip Code Transaction ID: PR9798014206 Dallas TX 75209-2402 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$200.00 Monthly) Other (specify) 600,00 Full Name (Last, First, Middle Initial) c. Ms. Meghann P. McKenna Date of Receipt Mailing Address 3151 Lily Drive 03 31 2016 City Zip Code State Transaction ID: PR9822414206 MT Bozeman 59718-6088 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 680.76 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

|                                                   | FOF  | LINE    | NU | MBER | : | PAGE | : 1 | 52 OF | 1 | 175 |
|---------------------------------------------------|------|---------|----|------|---|------|-----|-------|---|-----|
| Use separate schedule(s)                          | (che | ck only | or | ne)  |   |      |     |       |   |     |
| for each category of the<br>Detailed Summary Page | X    | 11a     |    | 11b  |   | 11c  |     | 12    |   |     |
|                                                   |      | 13      |    | 14   |   | 15   |     | 16    |   | 17  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. Gary J. Miller Date of Receipt Mailing Address 1211 E Nicolet Avenue 31 2016 City State Zip Code Transaction ID: PR9854114206 85020-5118 Phoenix ΑZ Amount of Each Receipt this Period FEC ID number of contributing C 70.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$70.00 Monthly) 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jay P. Miller Date of Receipt Mailing Address 5407 Landon Circle 03 31 2016 City State Zip Code Transaction ID: PR9855214206 FL **Boynton Beach** 33437-1677 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$83.34 Monthly) Other (specify) 250.02 Full Name (Last, First, Middle Initial) **c.** Mr. Robert A. Moro Date of Receipt Mailing Address 50 Wenwood Drive 03 31 2016 City Zip Code State Transaction ID: PR9886514206 NY Hauppauge 11788-4321 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 750.00 Other (specify) 403.34 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 153 OF 175 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mr. James W. Bergeron Date of Receipt Mailing Address 1543 Sunswept Drive 2016 31 City Zip Code State Transaction ID: PR99214206 MD Bel Air 21015-5025 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. William E. Pearce Date of Receipt Mailing Address 5021 Corinthian Bay Drive 03 31 2016 City State Zip Code Transaction ID: PR9998314206 TX Frisco 75034-2163 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Memo Item Name of Employer Occupation New York Life Insurance Company Senior Partner Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 176.94 SUBTOTAL of Receipts This Page (optional)..... 68901.18 TOTAL This Period (last page this line number only).....

### S 17

| y information copied from such Reports and Statements may not be sold or used by any person commercial purposes, other than using the name and address of any political committee to NAME OF COMMITTEE (In Full)  New York Life Insurance Company Political Action Committee  Full Name (Last, First, Middle Initial)  Steve Israel For Congress Committee  Mailing Address P.O. Box 1400  City State Zip Code  NY 11747  FEC ID number of contributing federal political committee.  Receipt For: 2016 Primary Congress Committee  Receipt For: 2016 Primary Cotte (Specify) ▼ State Zip Code  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Cupation  Receipt For: Primary Cotte (Specify) ▼ State Zip Code  FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  C Name of Employer Occupation | FOR LINE NUMBER: PAGE 154 OF 175                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
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| for commercial purposes, other than using the name and address of any political committee to NAME OF COMMITTEE (In Full)  New York Life Insurance Company Political Action Committee  Full Name (Last, First, Middle Initial)  Steve Israel For Congress Committee  Mailing Address P.O. Box 1400  City State Zip Code NY 11747  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: 2016 Aggregate Year-to-Date ▼  Primary Sceneral Other (specify) ▼  State Zip Code  Primary State Zip Code  City State Zip Code  FEC ID number of contributing federal political committee.  Companies State Zip Code  Companies State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  C  C  Name of Employer Occupation                                                                                                                                                                                           | (check only one)  11a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| New York Life Insurance Company Political Action Committee  Full Name (Last, First, Middle Initial) Steve Israel For Congress Committee  Mailing Address P.O. Box 1400  City State Zip Code Melville NY 11747  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: 2016 Primary General Other (specify) ▼ State Zip Code  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Occupation  Receipt For: Occupation  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  C Coupation  C Coupation  C C Coupation                                                                                                                                                                                                                                                                                                                                                                                                         | on for the purpose of soliciting contributions solicit contributions from such committee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Steve Israel For Congress Committee  Mailing Address P.O. Box 1400  City State Zip Code NY 11747  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: 2016 Primary General Other (specify) ▼ State Zip Code  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  City State Zip Code  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| City State Zip Code Metville NY 11747  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2016 Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer  Cupation  Aggregate Year-to-Date ▼  Cupation  Cupation  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Cupation                                                                                                                                                                                                                                                                                                                                                                                                                                  | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Melville NY 11747   FEC ID number of contributing federal political committee. C C00358952   Name of Employer Occupation   Receipt For: 2016 Aggregate Year-to-Date ▼   Primary General 5000.00   Full Name (Last, First, Middle Initial) Mailing Address   City State Zip Code   FEC ID number of contributing federal political committee. C   Name of Employer Occupation   Receipt For: Primary General Other (specify) ▼   Full Name (Last, First, Middle Initial)   Mailing Address   City State Zip Code   FEC ID number of contributing federal political committee. C   Name of Employer Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 03 16 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2016 Primary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Transaction ID: 11049103                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Receipt For: 2016 Primary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Receipt For: 2016  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Aggregate Year-to-Date ▼  C  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  C  C  C  C  C  C  C  C  C  C  C  C  C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Primary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Contribution itemized in the 2015 April Monthly R                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| FEC ID number of contributing federal political committee.  Name of Employer    Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | M = M / D = D / Y = Y = Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Receipt For:  Primary Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  C  C  C  C  C  C  C  C  C  C  C  C  C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Receipt For:  Primary Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer  Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | This are the second that the s |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| FEC ID number of contributing federal political committee.  Name of Employer  Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | M = M / D = D / Y = Y = Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Name of Employer  Occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| UBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
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TOTAL This Period (last page this line number only).....

| SCHEDULE B (FEC Form 3X)                                                                                                          | Use separate sch                                 | nedule(s) | FOR LINE I               |                 | PAGE 155 OF 17                   |
|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-----------|--------------------------|-----------------|----------------------------------|
| ITEMIZED DISBURSEMENTS                                                                                                            | for each category<br>Detailed Summar             | of the    | (check only<br>21b<br>27 | 22<br>28a       | X 23 24 25 2<br>28b 28c 29 3     |
| Any information copied from such Reports and State or for commercial purposes, other than using the national commercial purposes. |                                                  |           |                          |                 |                                  |
| NAME OF COMMITTEE (In Full)                                                                                                       |                                                  |           |                          |                 |                                  |
| New York Life Insurance Company                                                                                                   | y Political Action                               | on Com    | mittee                   |                 |                                  |
| Full Name (Last, First, Middle Initial)                                                                                           |                                                  |           |                          |                 |                                  |
| A. Roskam For Congress Committee                                                                                                  |                                                  |           |                          | Date of         | Disbursement                     |
| Mailing Address P. O. Box 713                                                                                                     |                                                  |           |                          | 03              | 10 2016                          |
| City<br>Wheaton                                                                                                                   | State Zip Co                                     |           |                          | Transa          | action ID : 11007146             |
| Purpose of Disbursement<br>Contribution                                                                                           |                                                  |           | 011                      | Amount          | of Each Disbursement this Period |
| Candidate Name                                                                                                                    |                                                  |           |                          | -               |                                  |
| Peter Roskam                                                                                                                      |                                                  |           | Category/<br>Type        |                 | 1000.00                          |
| Senate President                                                                                                                  | ment For: 2016  Primary G  Other (specify)       | ieneral   |                          | Men<br>Contribu | no Item<br>tion                  |
| State: IL District: 06                                                                                                            |                                                  |           |                          |                 |                                  |
| Full Name (Last, First, Middle Initial)  B. Randy Hultgren For Congress                                                           |                                                  |           |                          |                 | Disbursement                     |
| Mailing Address PO Box 717                                                                                                        |                                                  |           |                          | 03              | 10 2016                          |
| St Charles                                                                                                                        | State Zip Co                                     |           |                          | Trans           | action ID : 11007148             |
| Purpose of Disbursement<br>Contribution                                                                                           |                                                  |           | 011                      | Amount          | of Each Disbursement this Period |
| Candidate Name                                                                                                                    |                                                  |           | Category/                |                 | 1000.00                          |
| Randy Hultgren                                                                                                                    |                                                  |           | Туре                     |                 |                                  |
|                                                                                                                                   | ment For: 2016<br>Primary G<br>Other (specify) ▼ | ieneral   |                          | Contribu        | no Item<br>Ition                 |
| Full Name (Last, First, Middle Initial)  C. Huizenga For Congress                                                                 |                                                  |           |                          | Date of         | Disbursement                     |
| Mailing Address PO Box 254                                                                                                        |                                                  |           |                          | 03              | 18 2016                          |
| City<br>Zeeland                                                                                                                   | State Zip Co                                     |           |                          | Trans           | action ID : 11048445             |
| Purpose of Disbursement Contribution                                                                                              |                                                  |           | 011                      | Amount          | of Each Disbursement this Period |
| Candidate Name William P. Huizenga                                                                                                |                                                  |           | Category/                | 7 1110 1111     | 2500.00                          |
|                                                                                                                                   | ment For: 2016 Primary G Other (specify)         | General   | Туре                     | Men<br>Contribu | no Item                          |
| SUBTOTAL of Disbursements This Page (optional).                                                                                   |                                                  |           | ······ •                 | Ċ               | 4500.00                          |
| TOTAL This Period (last page this line number only                                                                                | )                                                |           | ·····•                   |                 |                                  |

| SCHEDULE B (FEC Form 3X)                                | Has somewhat and the Co.                          | FOR LINE    | NUMBER: PAGE 156 OF 175                 |
|---------------------------------------------------------|---------------------------------------------------|-------------|-----------------------------------------|
| TEMIZED DISBURSEMENTS                                   | Use separate schedule(s) for each category of the | (check only |                                         |
|                                                         | Detailed Summary Page                             | 21b         | 22 X 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any information copied from such Reports and Statem     | nente may not be cold or use                      |             |                                         |
| or for commercial purposes, other than using the name   |                                                   |             |                                         |
| NAME OF COMMITTEE (In Full)                             | · ·                                               |             |                                         |
| New York Life Insurance Company                         | Political Action Con                              | nmittee     |                                         |
| Full Name (Last, First, Middle Initial)                 |                                                   |             | B . (B)                                 |
| Friends Of Bill Posey                                   |                                                   |             | Date of Disbursement                    |
| Mailing Address P. O. Box 411486                        |                                                   |             | 03 18 2016                              |
|                                                         | State Zip Code                                    |             | Transaction ID: 11048448                |
| Melbourne Purpose of Disbursement                       | FL 32941                                          |             | -                                       |
| Contribution                                            |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                          |                                                   | Category/   | 2500.00                                 |
| Bill Posey                                              | aont Fore SS :                                    | Type        |                                         |
|                                                         | nent For: 2016 Primary General                    |             | Memo Item                               |
|                                                         | Other (specify)                                   |             | Contribution                            |
| State: FL District: 08                                  | V (* * * * * * * * * * * * * * * * * * *          |             |                                         |
| Full Name (Last, First, Middle Initial)                 |                                                   |             |                                         |
| 3. Friends Of Erik Paulsen                              |                                                   |             | Date of Disbursement                    |
| Mailing Address P.O. Box 44369 250 Prairie Center Drive |                                                   |             | 03 18 2016                              |
| City                                                    | State Zip Code                                    |             | Transaction ID : 11048450               |
| Eden Prairie Purpose of Disbursement                    | MN 55344                                          |             |                                         |
| Contribution                                            |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                          |                                                   | Category/   |                                         |
| Erik P. Paulsen                                         |                                                   | Type        | 2500.00                                 |
|                                                         | nent For: 2016                                    |             | Memo Item                               |
|                                                         | Primary General                                   |             | Contribution                            |
| State: MN District: 03                                  | Other (specify) ▼                                 |             |                                         |
| Full Name (Last, First, Middle Initial)                 |                                                   |             |                                         |
| C. Kinzinger For Congress                               |                                                   |             | Date of Disbursement                    |
|                                                         |                                                   |             | M M / D D / Y Y Y Y                     |
| Mailing Address PO Box 2365                             |                                                   |             | 03 18 2016                              |
| City                                                    | State Zip Code                                    |             | Transaction ID : 11048451               |
| Ottawa                                                  | IL 61350                                          |             | 11a115aCuOII ID . 11U40431              |
| Purpose of Disbursement<br>Contribution                 |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                          |                                                   | Category/   | , and an end biggardenient this renou   |
| Adam Kinzinger                                          |                                                   | Type        | 2500.00                                 |
|                                                         | nent For: 2016                                    |             | Memo Item                               |
|                                                         | Primary General                                   |             | Contribution                            |
| State: IL District: 16                                  | Other (specify) ▼                                 |             |                                         |
| State. IE District. 10                                  |                                                   |             |                                         |
| SUBTOTAL of Disbursements This Page (optional)          |                                                   |             | 7500.00                                 |
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| TOTAL This Period (last page this line number only)     |                                                   |             |                                         |

| SCHEDULE B (FEC Form 3X)                                                                                  | Lico concrete cohedula(=)                         | FOR LINE    |                                         |
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| TEMIZED DISBURSEMENTS                                                                                     | Use separate schedule(s) for each category of the | (check only | one) 22 💢 23 24 25 26                   |
|                                                                                                           | Detailed Summary Page                             | 27          | 28                                      |
| Any information copied from such Reports and Staten or for commercial purposes, other than using the name |                                                   |             |                                         |
| NAME OF COMMITTEE (In Full)                                                                               | ary pointed                                       |             |                                         |
| New York Life Insurance Company                                                                           | Political Action Com                              | nmittee     |                                         |
| Full Name (Last, First, Middle Initial)                                                                   |                                                   |             | Data of Dishurs                         |
| A. Scalise For Congress                                                                                   |                                                   |             | Date of Disbursement                    |
| Mailing Address PO Box 23219                                                                              |                                                   |             | 03 18 2016                              |
|                                                                                                           | State Zip Code                                    |             | Transaction ID : 11048457               |
| Jefferson Purpose of Disbursement                                                                         | LA 70183                                          |             |                                         |
| Contribution                                                                                              |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                                                                            |                                                   | Category/   | 2500.00                                 |
| Steve Scalise  Office Sought:                                                                             | nent For: 2040                                    | Туре        |                                         |
| Senate                                                                                                    | nent For: 2016  Primary General  Other (specify)  |             | Memo Item Contribution                  |
| State: LA District: 01                                                                                    |                                                   |             |                                         |
| Full Name (Last, First, Middle Initial)                                                                   |                                                   |             | Date of Disbursement                    |
| 3. Hatch Election Committee Inc.                                                                          |                                                   |             | Date of Disbursement                    |
| Mailing Address PO Box 3986                                                                               |                                                   |             | 03 18 2016                              |
| City S<br>Washington                                                                                      | State Zip Code<br>DC 20027                        |             | Transaction ID : 11048592               |
| Purpose of Disbursement<br>Contribution                                                                   |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                                                                            |                                                   | Category/   |                                         |
| Orrin G. Hatch                                                                                            |                                                   | Type        | 1000.00                                 |
|                                                                                                           | nent For: 2018  Primary General  Other (specify)  |             | Memo Item Contribution                  |
| State: UT District:                                                                                       |                                                   |             |                                         |
| Full Name (Last, First, Middle Initial)  Luke Messer For Congress                                         |                                                   |             | Date of Disbursement                    |
| Mailing Address PO Box 917                                                                                |                                                   |             | 03 18 2016                              |
| City                                                                                                      | State Zip Code                                    |             |                                         |
| Shelbyville                                                                                               | IN 46176                                          |             | Transaction ID: 11048593                |
| Purpose of Disbursement<br>Contribution                                                                   |                                                   | 011         | Amount of Fook Dishurrant this Build    |
| Candidate Name                                                                                            |                                                   | Category/   | Amount of Each Disbursement this Period |
| Allen Lucas Messer                                                                                        |                                                   | Type        | 2500.00                                 |
| Senate                                                                                                    | nent For: 2016  Primary General  Other (specify)  |             | Memo Item Contribution                  |
| State: IN District: 06                                                                                    | onici (opedity) ▼                                 |             |                                         |
| SUBTOTAL of Disbursements This Page (optional)                                                            |                                                   |             | 6000.00                                 |
|                                                                                                           |                                                   |             |                                         |
| TOTAL This Period (last page this line number only)                                                       |                                                   |             |                                         |

| SCHEDULE B (FEC Form 3X)                                                                                  | Use separate schedule(s)                          | FOR LINE I         |                                         |
|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------|-----------------------------------------|
| ITEMIZED DISBURSEMENTS                                                                                    | for each category of the<br>Detailed Summary Page | (check only 21b 27 | one) 22 X 23 24 25 26 28a 28b 28c 29 30 |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name |                                                   |                    |                                         |
| NAME OF COMMITTEE (In Full)                                                                               | _                                                 |                    |                                         |
| New York Life Insurance Company                                                                           | Political Action Cor                              | nmittee            |                                         |
| Full Name (Last, First, Middle Initial)                                                                   |                                                   |                    | 2. (2.)                                 |
| A. Luke Messer For Congress                                                                               |                                                   |                    | Date of Disbursement                    |
| Mailing Address PO Box 917                                                                                |                                                   |                    | 03 18 2016                              |
| ,                                                                                                         | tate Zip Code                                     |                    | Transaction ID : 11048599               |
| Shelbyville Purpose of Disbursement                                                                       | IN 46176                                          |                    |                                         |
| Contribution                                                                                              |                                                   | 011                | Amount of Each Disbursement this Period |
| Candidate Name                                                                                            |                                                   | Category/          | 2000.00                                 |
| Allen Lucas Messer                                                                                        |                                                   | Type               | 2000.00                                 |
| Senate<br>President                                                                                       | nent For: 2016  Primary                           |                    | Memo Item<br>Contribution               |
| State: IN District: 06                                                                                    |                                                   |                    |                                         |
| Full Name (Last, First, Middle Initial)  B. Friends Of Dennis Ross                                        |                                                   |                    | Date of Disbursement                    |
| Mailing Address P.O. Box 7310                                                                             |                                                   |                    | 03 18 2016                              |
| Lakeland                                                                                                  | itate Zip Code<br>FL 33807                        |                    | Transaction ID : 11048605               |
| Purpose of Disbursement<br>Contribution                                                                   |                                                   | 011                | Amount of Each Disbursement this Period |
| Candidate Name                                                                                            |                                                   | Category/          |                                         |
| Dennis Alan Ross                                                                                          |                                                   | Type               | 2500.00                                 |
| Senate                                                                                                    | nent For: 2016 Primary General Other (specify) ▼  |                    | Memo Item Contribution                  |
| Full Name (Last, First, Middle Initial) C. Norma Torres For Congress                                      |                                                   |                    | Date of Disbursement                    |
|                                                                                                           |                                                   |                    | M M / D D / Y Y Y Y                     |
| Mailing Address 728 W Edna Place                                                                          |                                                   |                    | 03 18 2016                              |
| Covina                                                                                                    | State Zip Code<br>CA 91722                        |                    | Transaction ID: 11048611                |
| Purpose of Disbursement<br>Contribution                                                                   |                                                   | 044                |                                         |
| Candidate Name                                                                                            |                                                   | 011                | Amount of Each Disbursement this Period |
| Norma Torres                                                                                              |                                                   | Category/<br>Type  | 2500.00                                 |
| Office Sought: House Disburser Senate President                                                           | nent For: 2016 Primary General Other (specify)    | .,,,,,             | Memo Item<br>Contribution               |
| State: CA District: 35                                                                                    |                                                   |                    |                                         |
| SUBTOTAL of Disbursements This Page (optional)                                                            |                                                   | ·····•             | 7000.00                                 |
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| SCHEDULE B (FEC FOI<br>ITEMIZED DISBURSEME                                                                                                                                                                                                                                              | Use sepa            | Use separate schedule(s)                              |                   | FOR LINE NUMBER: PAGE 159 OF 17 (check only one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
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| DIODONOLINIL                                                                                                                                                                                                                                                                            | ior each            | category of the<br>Summary Page                       | 21b<br>27         | 22 X 23 24 25 26<br>28a 28b 28c 29 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
|                                                                                                                                                                                                                                                                                         |                     |                                                       |                   | on for the purpose of soliciting contributions solicit contributions from such committee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| NAME OF COMMITTEE (In Full)                                                                                                                                                                                                                                                             | and and and and add | . ccs or any pontion                                  | 301111111100 10   | Sense |  |
| New York Life Insurance                                                                                                                                                                                                                                                                 |                     | al Action Com                                         | nmittee           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| Full Name (Last, First, Middle Initi                                                                                                                                                                                                                                                    | ,                   |                                                       |                   | Data of Bishamana                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| A. People For Derek Kilme                                                                                                                                                                                                                                                               | er                  |                                                       |                   | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Mailing Address PO Box 1381                                                                                                                                                                                                                                                             |                     |                                                       |                   | 03 18 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
| City                                                                                                                                                                                                                                                                                    | State               | Zip Code                                              |                   | Transaction ID : 11048706                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| Tacoma                                                                                                                                                                                                                                                                                  | WA                  | 98402                                                 |                   | 11ansaction iD . 11046706                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| Purpose of Disbursement<br>Contribution                                                                                                                                                                                                                                                 |                     |                                                       | 011               | Amount of Each Disbursement this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Candidate Name  Derek Kilmer                                                                                                                                                                                                                                                            |                     |                                                       | Category/         | 2500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Office Sought:  House                                                                                                                                                                                                                                                                   | Disbursement For:   |                                                       | Туре              | Mama Itam                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| Senate<br>President                                                                                                                                                                                                                                                                     | Primary Other (spe  | General                                               |                   | Memo Item Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| State: WA District: 06                                                                                                                                                                                                                                                                  |                     |                                                       |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| Full Name (Last, First, Middle Initi                                                                                                                                                                                                                                                    | al)                 |                                                       |                   | Data of Diahuwaanaa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| B. Cleaver For Congress                                                                                                                                                                                                                                                                 |                     |                                                       |                   | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Mailing Address 4801 Main Street                                                                                                                                                                                                                                                        | ;, Suite 1000       |                                                       |                   | 03 18 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
| City                                                                                                                                                                                                                                                                                    | State               | Zip Code                                              |                   | Transaction ID : 11048707                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| Kansas City                                                                                                                                                                                                                                                                             | МО                  | 64112                                                 |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| Purpose of Disbursement<br>Contribution                                                                                                                                                                                                                                                 |                     |                                                       | 011               | Amount of Each Disbursement this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Candidate Name                                                                                                                                                                                                                                                                          |                     |                                                       | Category/         | 2500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Emanuel Cleaver II                                                                                                                                                                                                                                                                      |                     | 0040                                                  | Туре              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
|                                                                                                                                                                                                                                                                                         | Dichuroomont For:   |                                                       | I                 | Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| Office Sought: House Senate                                                                                                                                                                                                                                                             | Disbursement For:   |                                                       |                   | On adults sating                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| Senate                                                                                                                                                                                                                                                                                  | Primary             | X General                                             |                   | Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
|                                                                                                                                                                                                                                                                                         |                     | X General                                             |                   | Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
| Senate<br>President                                                                                                                                                                                                                                                                     | Primary Other (spe  | X General                                             |                   | Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
| State: MO District: 05  Full Name (Last, First, Middle Initi                                                                                                                                                                                                                            | Primary Other (spe  | X General                                             |                   | Contribution  Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| State: MO District: 05  Full Name (Last, First, Middle Initi  C. Friends Of Dennis Ross                                                                                                                                                                                                 | Primary Other (spe  | X General                                             |                   | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Senate President State: MO District: 05                                                                                                                                                                                                                                                 | Primary Other (spe  | X General                                             |                   | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Senate President State: MO District: 05  Full Name (Last, First, Middle Initi C. Friends Of Dennis Ross  Mailing Address P.O. Box 7310                                                                                                                                                  | Primary Other (spe  | General cify) ▼                                       |                   | Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Senate President State: MO District: 05  Full Name (Last, First, Middle Initi C. Friends Of Dennis Ross  Mailing Address P.O. Box 7310  City Lakeland                                                                                                                                   | Primary Other (spe  | X General                                             |                   | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Senate President State: MO District: 05  Full Name (Last, First, Middle Initi C. Friends Of Dennis Ross  Mailing Address P.O. Box 7310  City Lakeland Purpose of Disbursement                                                                                                           | al) State           | General cify) ▼  Zip Code                             |                   | Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Senate President State: MO District: 05  Full Name (Last, First, Middle Initi C. Friends Of Dennis Ross  Mailing Address P.O. Box 7310  City Lakeland Purpose of Disbursement Contribution                                                                                              | al) State           | General cify) ▼  Zip Code                             | 011               | Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Senate President State: MO District: 05  Full Name (Last, First, Middle Initi C. Friends Of Dennis Ross  Mailing Address P.O. Box 7310  City Lakeland Purpose of Disbursement Contribution  Candidate Name                                                                              | al) State           | General cify) ▼  Zip Code                             | Category/         | Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Senate President State: MO District: 05  Full Name (Last, First, Middle Initi C. Friends Of Dennis Ross  Mailing Address P.O. Box 7310  City Lakeland Purpose of Disbursement Contribution  Candidate Name Dennis Alan Ross                                                             | Primary Other (spe  | General cify) ▼  Zip Code 33807                       |                   | Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Senate President                                                      | al) State           | General cify) ▼  Zip Code 33807                       | Category/         | Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Senate President President President State: MO District: 05  Full Name (Last, First, Middle Initi C. Friends Of Dennis Ross  Mailing Address P.O. Box 7310  City Lakeland Purpose of Disbursement Contribution  Candidate Name Dennis Alan Ross  Office Sought: House Senate            | Primary Other (spe  | General cify) ▼  Zip Code 33807                       | Category/         | Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Senate President                                                      | Primary Other (spe  | General cify) ▼  Zip Code 33807  2016 General cify) ▼ | Category/<br>Type | Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Senate President State: MO District: 05  Full Name (Last, First, Middle Initi Friends Of Dennis Ross  Mailing Address P.O. Box 7310  City Lakeland Purpose of Disbursement Contribution  Candidate Name Dennis Alan Ross  Office Sought:  House Senate President State: FL District: 15 | Primary Other (spe  | General cify) ▼  Zip Code 33807  2016 General cify) ▼ | Category/<br>Type | Date of Disbursement  M M / 18 / 2016  Transaction ID : 11048708  Amount of Each Disbursement this Period  2500.00  Memo Item Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |

| SCHEDULE B (FEC Form 3X)                             | Han annount out 117                               | FOR LINE       |                                            |
|------------------------------------------------------|---------------------------------------------------|----------------|--------------------------------------------|
| TEMIZED DISBURSEMENTS                                | Use separate schedule(s) for each category of the | (check only    |                                            |
|                                                      | Detailed Summary Page                             | 21b<br>27      | 22 X 23 24 25 26<br>28a 28b 28c 29 30b     |
| Any information copied from such Reports and Statem  | nente may not be cold or use                      |                |                                            |
| or for commercial purposes, other than using the nam | ne and address of any politica                    | l committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)                          |                                                   |                |                                            |
| New York Life Insurance Company                      | Political Action Com                              | mittee         |                                            |
| Full Name (Last, First, Middle Initial)              |                                                   |                | D                                          |
| Scott Peters For Congress                            |                                                   |                | Date of Disbursement                       |
| Mailing Address PO Box 75357                         |                                                   |                | 03 18 2016                                 |
|                                                      | State Zip Code DC 20013                           |                | Transaction ID: 11048710                   |
| Washington Purpose of Disbursement                   | 20013                                             |                |                                            |
| Contribution                                         |                                                   | 011            | Amount of Each Disbursement this Period    |
| Candidate Name                                       |                                                   | Category/      | 2500.00                                    |
| Scott Peters                                         | and Fam. 6515                                     | Type           | 2000.00                                    |
| Senate                                               | nent For: 2016  Primary General  Other (specify)  |                | Memo Item Contribution                     |
| State: CA District: 52                               |                                                   |                |                                            |
| Full Name (Last, First, Middle Initial)              |                                                   |                |                                            |
| Kind For Congress Committee                          |                                                   |                | Date of Disbursement                       |
| Mailing Address 205 5th Avenue S Room 428            |                                                   |                | 03 18 2016                                 |
| La Crosse                                            | State Zip Code<br>WI 54601                        |                | Transaction ID: 11048711                   |
| Purpose of Disbursement<br>Contribution              |                                                   | 011            | Amount of Each Disbursement this Period    |
| Candidate Name                                       |                                                   | Category/      |                                            |
| Ronald James Kind                                    |                                                   | Type           | 2500.00                                    |
| Senate                                               | nent For: 2016 Primary General Other (specify)    |                | Memo Item Contribution                     |
| State: WI District: 03                               |                                                   |                |                                            |
| Full Name (Last, First, Middle Initial)              |                                                   |                | Date of Disbursement                       |
| Committee To Re-Elect Linda Sand                     | JII <del>U</del> Z                                |                | M M / D D / Y Y Y Y                        |
| Mailing Address 410 1st St Se<br>Suite 310           |                                                   |                | 03 18 2016                                 |
| City                                                 | State Zip Code                                    |                | Transaction ID : 11048712                  |
|                                                      | DC 20003                                          |                |                                            |
| Purpose of Disbursement<br>Contribution              |                                                   | 011            | Amount of Each Disbursement this Period    |
| Candidate Name                                       |                                                   | Category/      | 2500.00                                    |
| Linda Sanchez                                        | cont Form 2010                                    | Туре           | 2300.00                                    |
|                                                      | nent For: 2016  Primary General  Other (specify)  |                | Memo Item Contribution                     |
| State: CA District: 38                               | • • • •                                           |                |                                            |
| SUBTOTAL of Disbursements This Page (optional)       |                                                   |                | 7500.00                                    |
| TOTAL This Period (last nage this line number only)  |                                                   |                |                                            |

| SCHEDULE B (FEC Form 3X)                             | Has assessed to be dealer (1)                     | FOR LINE          | NUMBER: PAGE 161 OF 175                 |
|------------------------------------------------------|---------------------------------------------------|-------------------|-----------------------------------------|
| TEMIZED DISBURSEMENTS                                | Use separate schedule(s) for each category of the | (check only       |                                         |
|                                                      | Detailed Summary Page                             | 21b               | 22 X 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any information copied from such Reports and Statem  | lents may not be sold or us                       |                   |                                         |
| or for commercial purposes, other than using the nam |                                                   |                   |                                         |
| NAME OF COMMITTEE (In Full)                          |                                                   |                   |                                         |
| New York Life Insurance Company                      | Political Action Cor                              | mmittee           |                                         |
| Full Name (Last, First, Middle Initial)              |                                                   |                   | Data of Dishara and                     |
| A. Raul Labrador For Idaho                           |                                                   |                   | Date of Disbursement                    |
| Mailing Address PO Box 1616                          |                                                   |                   | 03 18 2016                              |
|                                                      | State Zip Code                                    |                   | Transaction ID : 11048713               |
| Boise                                                | ID 83701                                          |                   |                                         |
| Purpose of Disbursement<br>Contribution              |                                                   | 011               | Amount of Each Disbursement this Period |
| Candidate Name                                       |                                                   | Category/         | 1000.00                                 |
| Raul R. Labrador                                     | and Francisco                                     | Type              |                                         |
| Senate                                               | nent For: 2016 Primary General                    |                   | Memo Item Contribution                  |
| State: ID District: 01                               | Other (specify) ▼                                 |                   |                                         |
| Full Name (Last, First, Middle Initial)              |                                                   |                   |                                         |
| Bennet For Colorado                                  |                                                   |                   | Date of Disbursement                    |
| Mailing Address PO Box 3078                          |                                                   |                   | 03 18 2016                              |
| ,                                                    | State Zip Code                                    |                   | Transaction ID : 11048714               |
|                                                      | CO 80201                                          |                   | 11410/14                                |
| Purpose of Disbursement<br>Contribution              | T                                                 | 011               | Amount of Each Disbursement this Period |
| Candidate Name                                       |                                                   |                   | Amount of Each Dispulsement this Period |
| Michael F. Bennet                                    |                                                   | Category/<br>Type | 5000.00                                 |
|                                                      | nent For: 2016                                    | A15.=             | Memo Item                               |
| X Senate                                             | Primary General                                   |                   | Contribution                            |
|                                                      | Other (specify) ▼                                 |                   |                                         |
| State: CO District:                                  |                                                   |                   |                                         |
| Full Name (Last, First, Middle Initial)              |                                                   |                   | Date of Disbursement                    |
| C. Kuster For Congress Inc.                          |                                                   |                   |                                         |
| Mailing Address PO Box 1498                          |                                                   |                   | 03 18 2016                              |
| City                                                 | State Zip Code                                    |                   | Transaction ID 44040745                 |
| Concord                                              | NH 03302                                          |                   | Transaction ID: 11048715                |
| Purpose of Disbursement Contribution                 |                                                   | 011               | Amount of Each Disbursement this Period |
| Candidate Name                                       |                                                   | Category/         |                                         |
| Ann McLane Kuster                                    |                                                   | Type              | 3000.00                                 |
|                                                      | nent For: 2016                                    |                   | Memo Item                               |
|                                                      | Primary General                                   |                   | Contribution                            |
| State: NH District: 02                               | Other (specify) ▼                                 |                   |                                         |
| State. INT DISTITUTE UZ                              |                                                   |                   |                                         |
| SUBTOTAL of Disbursements This Page (optional)       |                                                   |                   | 9000.00                                 |
|                                                      |                                                   |                   |                                         |
| TOTAL This Period (last page this line number only)  |                                                   |                   |                                         |

| SCHEDULE B (FEC Form 3X)                                                                                    |                                                   | FOR LINE          | NUMBER: PAGE 162 OF 175                      |
|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------|----------------------------------------------|
| TEMIZED DISBURSEMENTS                                                                                       | Use separate schedule(s) for each category of the | (check only       |                                              |
|                                                                                                             | Detailed Summary Page                             | 21b               | 22 🗙 23 24 25 26                             |
|                                                                                                             |                                                   | 27                | 28a 28b 28c 29 30b                           |
| Any information copied from such Reports and Statem<br>or for commercial purposes, other than using the nam |                                                   |                   |                                              |
| NAME OF COMMITTEE (In Full)                                                                                 | ic and address of any points                      | ar committee to   | Solicit Continuations from Such Committee.   |
| New York Life Insurance Company                                                                             | Political Action Con                              | nmittoo           |                                              |
| New Tork Life insurance Company                                                                             | Fullical Action Col                               | IIIIIIIII         |                                              |
| Full Name (Last, First, Middle Initial)                                                                     |                                                   |                   |                                              |
| A. Van Hollen for Senate                                                                                    |                                                   |                   | Date of Disbursement                         |
| Mailing Address 10605 Concord Street                                                                        |                                                   |                   | 03 18 2016                                   |
| Suite 202                                                                                                   |                                                   |                   | 03 10 2010                                   |
| City                                                                                                        | State Zip Code                                    |                   | Transaction ID : 44040747                    |
|                                                                                                             | MD 20895                                          |                   | Transaction ID: 11048717                     |
| Purpose of Disbursement<br>Contribution                                                                     |                                                   | 044               | Assessed of Early Dichesses and this Deviced |
| Candidate Name                                                                                              |                                                   | 011               | Amount of Each Disbursement this Period      |
| Chris Van Hollen                                                                                            |                                                   | Category/<br>Type | 5000.00                                      |
|                                                                                                             | nent For: 2016                                    | Турс              | Memo Item                                    |
|                                                                                                             | Primary General                                   |                   | Contribution                                 |
| President                                                                                                   | Other (specify) ▼                                 |                   |                                              |
| State: MD District:                                                                                         |                                                   |                   |                                              |
| Full Name (Last, First, Middle Initial)                                                                     |                                                   |                   | B (B) .                                      |
| 3. Van Hollen for Senate                                                                                    |                                                   |                   | Date of Disbursement                         |
| Mailing Address 10605 Concord Street                                                                        |                                                   |                   | 03 18 2016                                   |
| Suite 202                                                                                                   |                                                   |                   | .0                                           |
| City                                                                                                        | State Zip Code                                    |                   | Transaction ID : 11048718                    |
|                                                                                                             | MD 20895                                          |                   | 114116461111111111111111111111111111111      |
| Purpose of Disbursement<br>Contribution                                                                     |                                                   | 011               | Amount of Each Disbursement this Period      |
| Candidate Name                                                                                              |                                                   |                   | Amount of Each Biodurecticit this Ferred     |
| Chris Van Hollen                                                                                            |                                                   | Category/<br>Type | 5000.00                                      |
| Office Sought: House Disbursen                                                                              | nent For: 2016                                    |                   | Memo Item                                    |
|                                                                                                             | Primary General                                   |                   | Contribution                                 |
|                                                                                                             | Other (specify)                                   |                   |                                              |
| State: MD District:                                                                                         |                                                   |                   |                                              |
| Full Name (Last, First, Middle Initial)  Donald Norcross For Congress                                       |                                                   |                   | Date of Disbursement                         |
| Donaid Norchoss For Congress                                                                                |                                                   |                   | M M / D D / Y Y Y Y                          |
| Mailing Address PO Box 160                                                                                  |                                                   |                   | 03 18 2016                                   |
|                                                                                                             |                                                   |                   |                                              |
| •                                                                                                           | State Zip Code<br>NJ 08108                        |                   | Transaction ID: 11048783                     |
| Collingswood Purpose of Disbursement                                                                        | 100 00100                                         |                   |                                              |
| Contribution                                                                                                |                                                   | 011               | Amount of Each Disbursement this Period      |
| Candidate Name                                                                                              |                                                   | Category/         |                                              |
| Donald W. Norcross                                                                                          |                                                   | Type              | 2500.00                                      |
|                                                                                                             | nent For: 2016                                    |                   | Memo Item                                    |
| Senate                                                                                                      | Primary General Other (specify) ▼                 |                   | Contribution                                 |
| State: NJ District: 01                                                                                      | Outlet (Specify)                                  |                   |                                              |
| - 1.0 -1.0                                                                                                  |                                                   |                   |                                              |
| SUBTOTAL of Disbursements This Page (optional)                                                              |                                                   |                   | 12500.00                                     |
| <u> </u>                                                                                                    |                                                   |                   |                                              |
| TOTAL This Period (last page this line number only)                                                         |                                                   |                   |                                              |

| SCHEDULE B (FEC Form 3X)                                                                                    |                                                                 | FOR LINE       | NUMBER: PAGE 163 OF 175                                                                   |
|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------|-------------------------------------------------------------------------------------------|
| TEMIZED DISBURSEMENTS                                                                                       | Use separate schedule(s) for each category of the               | (check only    | one)                                                                                      |
| _                                                                                                           | Detailed Summary Page                                           | 21b            | 22 🗙 23 24 25 26                                                                          |
|                                                                                                             |                                                                 | 27             | 28a 28b 28c 29 30b                                                                        |
| Any information copied from such Reports and Staten<br>or for commercial purposes, other than using the nam | nents may not be sold or used<br>e and address of any political | d by any perso | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)                                                                                 |                                                                 | 30             | 23 2522                                                                                   |
| New York Life Insurance Company                                                                             | Political Action Com                                            | mittee         |                                                                                           |
| /                                                                                                           |                                                                 |                |                                                                                           |
| Full Name (Last, First, Middle Initial)                                                                     |                                                                 |                | D (B)                                                                                     |
| A. Alma Adams For Congress                                                                                  |                                                                 |                | Date of Disbursement                                                                      |
| Mailing Address P.O. Box 20622                                                                              |                                                                 |                | 03 18 2016                                                                                |
| Maining 7 (84) 666 1 . O. Box 20022                                                                         |                                                                 |                | 30 10 2010                                                                                |
| •                                                                                                           | State Zip Code                                                  |                | Transaction ID : 11048784                                                                 |
| Greensboro                                                                                                  | NC 27420                                                        |                | 1141134CHOH ID . 11040/04                                                                 |
| Purpose of Disbursement Contribution                                                                        |                                                                 | 011            | Amount of Each Disbursement this Period                                                   |
| Candidate Name                                                                                              |                                                                 | Category/      |                                                                                           |
| Alma Shealey Adams                                                                                          |                                                                 | Type           | 1500.00                                                                                   |
| •                                                                                                           | nent For: 2016                                                  | -              | Memo Item                                                                                 |
|                                                                                                             | Primary General                                                 |                | Contribution                                                                              |
| President President A2                                                                                      | Other (specify) ▼                                               |                |                                                                                           |
| State: NC District: 12                                                                                      |                                                                 |                |                                                                                           |
| Full Name (Last, First, Middle Initial)  3. Alma Adams For Congress                                         |                                                                 |                | Date of Disbursement                                                                      |
| 3. Alma Adams For Congress                                                                                  |                                                                 |                | M M / D D / Y Y Y Y                                                                       |
| Mailing Address P.O. Box 20622                                                                              |                                                                 |                | 03 18 2016                                                                                |
|                                                                                                             |                                                                 |                |                                                                                           |
| City S<br>Greensboro                                                                                        | State Zip Code<br>NC 27420                                      |                | Transaction ID: 11048790                                                                  |
| Purpose of Disbursement                                                                                     | 21420                                                           |                |                                                                                           |
| Contribution                                                                                                |                                                                 | 011            | Amount of Each Disbursement this Period                                                   |
| Candidate Name                                                                                              |                                                                 | Category/      | 1000.00                                                                                   |
| Alma Shealey Adams                                                                                          |                                                                 | Туре           | 1000.00                                                                                   |
|                                                                                                             | nent For: 2016                                                  |                | Memo Item                                                                                 |
|                                                                                                             | Primary General                                                 |                | Contribution                                                                              |
| State: NC District: 12                                                                                      | Other (specify) ▼                                               |                |                                                                                           |
| Full Name (Last, First, Middle Initial)                                                                     |                                                                 |                |                                                                                           |
| C. Duffy For Congress                                                                                       |                                                                 |                | Date of Disbursement                                                                      |
|                                                                                                             |                                                                 |                | M M / D D / Y Y Y Y                                                                       |
| Mailing Address PO Box 538                                                                                  |                                                                 |                | 03 18 2016                                                                                |
| City S                                                                                                      | State Zip Code                                                  |                |                                                                                           |
| Wausau                                                                                                      | WI 54402                                                        |                | Transaction ID: 11048791                                                                  |
| Purpose of Disbursement                                                                                     |                                                                 |                |                                                                                           |
| Contribution                                                                                                |                                                                 | 011            | Amount of Each Disbursement this Period                                                   |
| Candidate Name                                                                                              | ] "                                                             | Category/      | 2500.00                                                                                   |
| Sean Duffy  Office Sought:                                                                                  | nent For: 2016                                                  | Туре           |                                                                                           |
|                                                                                                             | Primary General                                                 |                | Memo Item                                                                                 |
|                                                                                                             | Other (specify)                                                 |                | Contribution                                                                              |
| State: WI District: 07                                                                                      | · · · · · · · · · · · · · · · · · · ·                           |                |                                                                                           |
|                                                                                                             |                                                                 |                |                                                                                           |
| SUBTOTAL of Disbursements This Page (optional)                                                              |                                                                 | ·····•         | 5000.00                                                                                   |
|                                                                                                             |                                                                 |                |                                                                                           |
| TOTAL This Period (last page this line number only)                                                         |                                                                 |                |                                                                                           |

| TEMIZED DISBUDGEMENTS                                                                                       | Use separate sched                         | lule(s) FOR LINE (check only |                                         |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------|-----------------------------------------|
| TEMIZED DISBURSEMENTS                                                                                       | for each category of<br>Detailed Summary F | f the Concor only            | 22 X 23 24 25 26<br>28a 28b 28c 29 30   |
| Any information copied from such Reports and Staten<br>or for commercial purposes, other than using the nam |                                            |                              |                                         |
| NAME OF COMMITTEE (In Full)                                                                                 | and decrees of diffy                       |                              | 22 2222                                 |
| New York Life Insurance Company                                                                             | Political Action                           | Committee                    |                                         |
| Full Name (Last, First, Middle Initial)                                                                     |                                            |                              | Data of Dishursomert                    |
| Lynn Jenkins For Congress                                                                                   |                                            |                              | Date of Disbursement                    |
| Mailing Address P.O. Box 1441                                                                               |                                            |                              | 03 18 2016                              |
| ,                                                                                                           | State Zip Code                             |                              | Transaction ID : 11048797               |
| Topeka                                                                                                      | KS 66601                                   |                              | Transaction is . Tro-to-157             |
| Purpose of Disbursement<br>Contribution                                                                     |                                            | 011                          | Amount of Each Disbursement this Period |
| Candidate Name                                                                                              |                                            | Category/                    | 2500.00                                 |
| Lynn Jenkins Office Sought:  House Disbursen                                                                | nent For: 2016                             | Туре                         |                                         |
| Senate President                                                                                            | Primary Gen Other (specify)                | eral                         | Memo Item Contribution                  |
| State: KS District: 02                                                                                      |                                            |                              |                                         |
| Full Name (Last, First, Middle Initial)  3. Securities Industry and Financial Market As                     | sociation Political A                      | Action Committee             | Date of Disbursement                    |
| Mailing Address 1101 New York Avenue, NW 8th Floor                                                          |                                            |                              | 03 18 2016                              |
| Washington                                                                                                  | State Zip Code<br>DC 20005                 |                              | Transaction ID : 11051924               |
| Purpose of Disbursement<br>Contribution                                                                     |                                            | 011                          | Amount of Each Disbursement this Period |
| Candidate Name                                                                                              |                                            | Category/<br>Type            | 5000.00                                 |
|                                                                                                             | nent For: Primary Gen Other (specify)      |                              | Memo Item Contribution                  |
| Full Name (Last, First, Middle Initial)  Tuesday Group Political Action Cor                                 | mmittee                                    |                              | Date of Disbursement                    |
| Mailing Address 209 Pennsylvania Avenue SE                                                                  |                                            |                              | 03 18 2016                              |
| City                                                                                                        | State Zip Code                             |                              |                                         |
| -                                                                                                           | DC 20003                                   |                              | Transaction ID: 11051926                |
|                                                                                                             |                                            | 011                          | Amount of Each Disbursement this Period |
| Contribution                                                                                                |                                            |                              |                                         |
| Candidate Name                                                                                              | mmittee                                    | Category/                    | 5000.00                                 |
| Candidate Name Tuesday Group Political Action Co Office Sought: House Disbursen Senate President            |                                            | Type                         | 5000.00  Memo Item Contribution         |
| Candidate Name Tuesday Group Political Action Co Office Sought: House Disbursen Senate                      | nent For:<br>Primary Gen                   | Type                         | Memo Item                               |

| SCHEDULE B (FEC Form 3X)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Use separate schedule(s)                                   | FOR LINE NUMBER: PAGE 165 OF 175 |                                                                                           |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------|--|
| ITEMIZED DISBURSEMENTS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | for each category of the<br>Detailed Summary Page          | (check only 21b 27               | one)  22 X 23 24 25 26  28a 28b 28c 29 30l                                                |  |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ents may not be sold or us<br>e and address of any politic | ed by any personal committee to  | on for the purpose of soliciting contributions solicit contributions from such committee. |  |
| NAME OF COMMITTEE (In Full)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                            |                                  |                                                                                           |  |
| New York Life Insurance Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Political Action Cor                                       | mmittee                          |                                                                                           |  |
| Full Name (Last, First, Middle Initial)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | · · · · · · · · · · · · · · · · · · ·                      | 1.040)                           | Data of Dishuranment                                                                      |  |
| A. Insured Retirement Institute Political A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Action Committee (IR                                       | I PAC)                           | Date of Disbursement                                                                      |  |
| Mailing Address 1100 Vermont Ave., NW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            |                                  | 03 18 2016                                                                                |  |
| 10th Floor, City S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | tate Zip Code                                              |                                  |                                                                                           |  |
| Washington                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | DC 20005                                                   |                                  | Transaction ID: 11051943                                                                  |  |
| Purpose of Disbursement<br>Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                            | 011                              | Amount of Each Disbursement this Period                                                   |  |
| Candidate Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                            | Category/                        |                                                                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            | Type                             | 5000.00                                                                                   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nent For: Primary General Other (specify) ▼                |                                  | Memo Item<br>Contribution                                                                 |  |
| State: District:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                            |                                  |                                                                                           |  |
| Full Name (Last, First, Middle Initial)  B. Investment Company Institute Politica                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | I Action Committee (                                       | (ICI PAC)                        | Date of Disbursement                                                                      |  |
| Mailing Address 1401 H Street, NW<br>Suite 1200                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |                                  | 03 18 2016                                                                                |  |
| Washington                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | tate Zip Code<br>DC 20005                                  |                                  | Transaction ID: 11051952                                                                  |  |
| Purpose of Disbursement<br>Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                            | 011                              | Amount of Each Disbursement this Period                                                   |  |
| Candidate Name Investment Company Institute Political Action Company Institute Politic | ommittee (ICI PAC)                                         | Category/                        | 5000.00                                                                                   |  |
| Office Sought: House Disbursem                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <u> </u>                                                   | Туре                             | Memo Item Contribution                                                                    |  |
| Full Name (Last, First, Middle Initial) C. Victory Now PAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                            |                                  | Date of Disbursement                                                                      |  |
| Mailing Address 10605 Concord Street Suite 202                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                            |                                  | 03 18 2016                                                                                |  |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | tate Zip Code<br>MD 20895                                  |                                  | Transaction ID: 11051953                                                                  |  |
| Purpose of Disbursement<br>Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                            | 011                              | Amount of Each Disbursement this Period                                                   |  |
| Candidate Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                            | Category/                        | 5000.00                                                                                   |  |
| Victory Now PAC  Office Sought: House Disbursem                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | pent For:                                                  | Туре                             |                                                                                           |  |
| Senate<br>President                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Primary General Other (specify) ▼                          |                                  | Memo Item Contribution                                                                    |  |
| State: District:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                            |                                  |                                                                                           |  |
| SUBTOTAL of Disbursements This Page (optional)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                            | <u> </u>                         | 15000.00                                                                                  |  |
| TOTAL This Period (last page this line number only).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                            |                                  |                                                                                           |  |

| SCHEDULE B (FEC Form 3X)                                                                                 | Use separate schedule(s)                       | FOR LINE (check only |                                                 |
|----------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------|-------------------------------------------------|
| TEMIZED DISBURSEMENTS                                                                                    | for each category of the Detailed Summary Page | 21b<br>27            | 22 X 23 24 25 26<br>28a 28b 28c 29 30           |
| Any information copied from such Reports and Staten or for commercial purposes, other than using the nam |                                                |                      |                                                 |
| NAME OF COMMITTEE (In Full)                                                                              |                                                | <u> </u>             |                                                 |
| New York Life Insurance Company                                                                          | Political Action Co                            | mmittee              |                                                 |
| Full Name (Last, First, Middle Initial)                                                                  |                                                |                      | Date of Disbursement                            |
| - Healthcare Freedom Fund                                                                                |                                                |                      | M M / D D / Y Y Y Y                             |
| Mailing Address P.O. Box 2485                                                                            |                                                |                      | 03 18 2016                                      |
| •                                                                                                        | State Zip Code                                 |                      | Transaction ID : 11051960                       |
| Springfield Purpose of Disbursement                                                                      | VA 22152                                       |                      | 1141134041011112 : 11001000                     |
| Contribution                                                                                             |                                                | 011                  | Amount of Each Disbursement this Period         |
| Candidate Name                                                                                           |                                                | Category/            | 5000.00                                         |
| Healthcare Freedom Fund                                                                                  |                                                | Type                 | 5000.00                                         |
| President                                                                                                | nent For:  Primary General  Other (specify)    |                      | Memo Item<br>Contribution                       |
| State: District:                                                                                         |                                                |                      |                                                 |
| Full Name (Last, First, Middle Initial)  - Tomorrow is Meaningful PAC-TIM                                | PAC                                            |                      | Date of Disbursement                            |
| Mailing Address P.O. Box 347                                                                             |                                                |                      | 03 18 2016                                      |
| ,                                                                                                        | State Zip Code                                 |                      | Transaction ID : 11051961                       |
| Haymarket Purpose of Disbursement                                                                        | VA 20168                                       |                      |                                                 |
| Contribution                                                                                             |                                                | 011                  | Amount of Each Disbursement this Period         |
| Candidate Name                                                                                           |                                                | Category/<br>Type    | 3000.00                                         |
|                                                                                                          | nent For: Primary General Other (specify)      |                      | Memo Item Contribution                          |
| State: District:                                                                                         |                                                |                      |                                                 |
| Full Name (Last, First, Middle Initial)  - New Opportunity for Real Monume                               | ntal Action (NORM                              | A PAC)               | Date of Disbursement                            |
| Mailing Address 728 W Edna Place                                                                         |                                                |                      | 03 18 2016                                      |
| Covina                                                                                                   | State Zip Code<br>CA 91722                     |                      | Transaction ID : 11051962                       |
| Purpose of Disbursement<br>Contribution                                                                  |                                                | 011                  |                                                 |
| Candidate Name                                                                                           |                                                | O11 Category/        | Amount of Each Disbursement this Period 5000.00 |
| Office Sought: House Disbursen                                                                           | nent For:                                      | Туре                 |                                                 |
|                                                                                                          | Primary General Other (specify) ▼              |                      | Memo Item Contribution                          |
| 2.53                                                                                                     |                                                |                      |                                                 |
| SUBTOTAL of Disbursements This Page (optional)                                                           |                                                |                      | 13000.00                                        |
| TOTAL This David (last page this line surely and )                                                       |                                                |                      |                                                 |
| TOTAL This Period (last page this line number only)                                                      |                                                |                      |                                                 |

| SCHEDULE B (FEC Form 3X)                                                                                  |                                                   | FOR LINE          | NUMBER: PAGE 167 OF 175                 |
|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------|-----------------------------------------|
| TEMIZED DISBURSEMENTS                                                                                     | Use separate schedule(s) for each category of the | (check only       | one)                                    |
|                                                                                                           | Detailed Summary Page                             | 21b<br>27         | 22 X 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any information popled from south Department 10:                                                          | anda mani mad ti a aatit a                        |                   |                                         |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name |                                                   |                   |                                         |
| NAME OF COMMITTEE (In Full)                                                                               |                                                   |                   |                                         |
| New York Life Insurance Company                                                                           | Political Action Con                              | nmittee           |                                         |
| Full Name (Last, First, Middle Initial)                                                                   |                                                   |                   |                                         |
| A. IMPACT                                                                                                 |                                                   |                   | Date of Disbursement                    |
| Mailing Address 192 Lexington Avenue, Suite 1001                                                          |                                                   |                   | 03 18 2016                              |
|                                                                                                           | state Zip Code                                    |                   | Transaction ID : 11051963               |
| New York Purpose of Disbursement                                                                          | NY 10016                                          |                   |                                         |
| Contribution                                                                                              |                                                   | 011               | Amount of Each Disbursement this Period |
| Candidate Name IMPACT                                                                                     |                                                   | Category/         | 2500.00                                 |
| Office Sought: House Disbursen                                                                            | nent For:                                         | Туре              | Mama Itam                               |
|                                                                                                           | Primary General                                   |                   | Memo Item Contribution                  |
|                                                                                                           | Other (specify) ▼                                 |                   |                                         |
| State: District:                                                                                          |                                                   |                   |                                         |
| Full Name (Last, First, Middle Initial)  3. Building Leadership and Inspiring N                           | low Enternation DAC                               |                   | Date of Disbursement                    |
| Building Leadership and Inspiring N                                                                       | new Enterprise PAC                                |                   | M M / D D / Y Y Y Y                     |
| Mailing Address P.O. Box 96                                                                               |                                                   |                   | 03 18 2016                              |
| •                                                                                                         | State Zip Code<br>MO 65075                        |                   | Transaction ID: 11051964                |
| St. Elizabeth Purpose of Disbursement                                                                     | 05075                                             |                   |                                         |
| Contribution                                                                                              |                                                   | 011               | Amount of Each Disbursement this Period |
| Candidate Name                                                                                            |                                                   | Category/         | 2500.00                                 |
| Office Sought: House Disbursen                                                                            | nent For:                                         | Туре              | Memo Item                               |
|                                                                                                           | Primary General                                   |                   | Contribution                            |
| President                                                                                                 | Other (specify) ▼                                 |                   |                                         |
| State: District:                                                                                          |                                                   |                   |                                         |
| Full Name (Last, First, Middle Initial)                                                                   |                                                   |                   | Date of Disbursement                    |
| More Conservatives PAC (McPAC)                                                                            |                                                   |                   | M M / D D / Y Y Y Y                     |
| Mailing Address 228 S Washington St                                                                       |                                                   |                   | 03 18 2016                              |
| Suite 115 City S                                                                                          | state Zip Code                                    |                   |                                         |
| Alexandria                                                                                                | VA 22314                                          |                   | Transaction ID: 11051965                |
| Purpose of Disbursement<br>Contribution                                                                   |                                                   | 011               |                                         |
| Candidate Name                                                                                            |                                                   | 011               | Amount of Each Disbursement this Period |
|                                                                                                           |                                                   | Category/<br>Type | 2500.00                                 |
| Office Sought: House Disbursen                                                                            | nent For:                                         |                   | Memo Item                               |
|                                                                                                           | Primary General                                   |                   | Contribution                            |
| State: District:                                                                                          | Other (specify) ▼                                 |                   |                                         |
| State. District.                                                                                          |                                                   |                   |                                         |
| SUBTOTAL of Disbursements This Page (optional)                                                            |                                                   | ·····•            | 7500.00                                 |
|                                                                                                           |                                                   |                   | 1                                       |

| SCHEDULE B (FEC Form 3X)                                                                                    |                                                                | FOR LINE                          | NUMBER: PAGE 168 OF 175                                                                   |
|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------------------------|
| TEMIZED DISBURSEMENTS                                                                                       | Use separate schedule(s) for each category of the              | (check only                       | one)                                                                                      |
| _                                                                                                           | Detailed Summary Page                                          | 21b                               | 22 🗙 23 24 25 26                                                                          |
|                                                                                                             |                                                                | 27                                | 28a 28b 28c 29 30b                                                                        |
| Any information copied from such Reports and Staten<br>or for commercial purposes, other than using the nam | nents may not be sold or use<br>re and address of any politica | d by any perso<br>Il committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)                                                                                 |                                                                |                                   |                                                                                           |
| New York Life Insurance Company                                                                             | Political Action Com                                           | nmittee                           |                                                                                           |
| Full Name (Last, First, Middle Initial)                                                                     |                                                                |                                   |                                                                                           |
| More Conservatives PAC (McPAC)                                                                              |                                                                |                                   | Date of Disbursement                                                                      |
| Mailing Address 228 S Washington St Suite 115                                                               |                                                                |                                   | 03 18 2016                                                                                |
| ,                                                                                                           | State Zip Code                                                 |                                   | Transaction ID: 11051966                                                                  |
| Alexandria Purpose of Disbursement                                                                          | VA 22314                                                       |                                   |                                                                                           |
| Contribution                                                                                                |                                                                | 011                               | Amount of Each Disbursement this Period                                                   |
| Candidate Name                                                                                              |                                                                | Category/                         | 2500.00                                                                                   |
| Office Sought: House Disbursen                                                                              | nent For:                                                      | Туре                              | Mome Item                                                                                 |
|                                                                                                             | Primary General                                                |                                   | Memo Item Contribution                                                                    |
| President                                                                                                   | Other (specify) ▼                                              |                                   |                                                                                           |
| State: District:                                                                                            |                                                                |                                   |                                                                                           |
| Full Name (Last, First, Middle Initial)                                                                     |                                                                |                                   |                                                                                           |
| 3. Walters For Congress                                                                                     |                                                                |                                   | Date of Disbursement                                                                      |
| Moiling Address 2070 India Octor Diver (450                                                                 |                                                                |                                   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                               |
| Mailing Address 9070 Irvine Center Drive #150                                                               |                                                                |                                   | 03 24 2016                                                                                |
| City S<br>Irvine                                                                                            | State Zip Code<br>CA 92618                                     |                                   | Transaction ID: 11053935                                                                  |
| Purpose of Disbursement                                                                                     | 92010                                                          |                                   |                                                                                           |
| Contribution                                                                                                |                                                                | 011                               | Amount of Each Disbursement this Period                                                   |
| Candidate Name                                                                                              |                                                                | Category/                         | 2500.00                                                                                   |
| Mimi Walters                                                                                                |                                                                | Туре                              | 2500.00                                                                                   |
|                                                                                                             | nent For: 2016                                                 |                                   | Memo Item                                                                                 |
|                                                                                                             | Primary                                                        |                                   | Contribution                                                                              |
| State: CA District: 45                                                                                      | Other (specify)                                                |                                   |                                                                                           |
| Full Name (Last, First, Middle Initial)                                                                     |                                                                |                                   |                                                                                           |
| Ron Johnson For Senate Inc.                                                                                 |                                                                |                                   | Date of Disbursement                                                                      |
| Moiling Address 040 5 Week's 4                                                                              |                                                                |                                   | M M / D D / Y Y Y Y Y                                                                     |
| Mailing Address 219 E Washington Ave Suite 101                                                              |                                                                |                                   | 03 24 2016                                                                                |
| City                                                                                                        | State Zip Code                                                 |                                   | Transaction ID : 11053937                                                                 |
| Oshkosh Purpose of Disbursement                                                                             | WI 54901                                                       |                                   |                                                                                           |
| Contribution                                                                                                |                                                                | 011                               | Amount of Each Disbursement this Period                                                   |
| Candidate Name                                                                                              |                                                                | Category/                         | Amount of Each Bissardoment this Feriod                                                   |
| Ronald Harold Johnson                                                                                       |                                                                | Type                              | 2500.00                                                                                   |
|                                                                                                             | nent For: 2016                                                 |                                   | Memo Item                                                                                 |
|                                                                                                             | Primary General                                                |                                   | Contribution                                                                              |
| State: WI District:                                                                                         | Other (specify) ▼                                              |                                   |                                                                                           |
| State. VVI District.                                                                                        |                                                                |                                   |                                                                                           |
| SUBTOTAL of Disbursements This Page (optional)                                                              |                                                                |                                   | 7500.00                                                                                   |
|                                                                                                             |                                                                |                                   |                                                                                           |
| <b>TOTAL</b> This Period (last page this line number only)                                                  |                                                                |                                   |                                                                                           |

| SCHEDULE B (FEC Form 3X)                             | Lloo concrete celectricie/-\                      | FOR LINE    |                                         |
|------------------------------------------------------|---------------------------------------------------|-------------|-----------------------------------------|
| TEMIZED DISBURSEMENTS                                | Use separate schedule(s) for each category of the | (check only |                                         |
|                                                      | Detailed Summary Page                             | 21b<br>27   | 22 X 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any information copied from such Reports and Statem  | lents may not be sold or use                      |             |                                         |
| or for commercial purposes, other than using the nam |                                                   |             |                                         |
| NAME OF COMMITTEE (In Full)                          |                                                   |             |                                         |
| New York Life Insurance Company                      | Political Action Cor                              | nmittee     |                                         |
| Full Name (Last, First, Middle Initial)              |                                                   |             | Date of Disk                            |
| Kenny Marchant For Congress                          |                                                   |             | Date of Disbursement                    |
| Mailing Address PO Box 110187                        | <del></del>                                       |             | 03 24 2016                              |
|                                                      | State Zip Code                                    |             | Transaction ID : 11053939               |
| Carrollton Purpose of Disbursement                   | TX 75011                                          |             |                                         |
| Contribution                                         |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                       |                                                   | Category/   | 2500.00                                 |
| Kenny E. Marchant                                    |                                                   | Type        | 2500.00                                 |
| Senate                                               | nent For: 2016 Primary                            |             | Memo Item<br>Contribution               |
| State: TX District: 24                               | · · · · · · · · · · · · · · · · · · ·             |             |                                         |
| Full Name (Last, First, Middle Initial)              |                                                   |             |                                         |
| 3. Crowley For Congress                              |                                                   |             | Date of Disbursement                    |
| Mailing Address 84-56 Grand Avenue                   |                                                   |             | 03 24 2016                              |
| Elmhurst                                             | State Zip Code<br>NY 11373                        |             | Transaction ID : 11053940               |
| Purpose of Disbursement Contribution                 |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                       |                                                   | Category/   |                                         |
| Joseph Crowley                                       |                                                   | Type        | 2500.00                                 |
| Office Sought: House Disbursem                       | nent For: 2016 Primary                            |             | Memo Item Contribution                  |
| State: NY District: 14                               |                                                   |             |                                         |
| Full Name (Last, First, Middle Initial)              |                                                   |             | Data of Diskurs and                     |
| Swalwell For Congress                                |                                                   |             | Date of Disbursement                    |
| Mailing Address P.O. Box 2847                        |                                                   |             | 03 24 7 2016                            |
| City                                                 | State Zip Code                                    |             |                                         |
| Dublin                                               | CA 94568                                          |             | Transaction ID: 11053941                |
| Purpose of Disbursement Contribution                 |                                                   | 011         | Amount of Each Disbursement this Period |
| Candidate Name                                       |                                                   | Category/   | Amount of Each Dispulsement this Period |
| Eric Michael Swalwell                                |                                                   | Type        | 1000.00                                 |
| Senate                                               | nent For: 2016 Primary General                    |             | Memo Item<br>Contribution               |
|                                                      | Other (specify) ▼                                 |             |                                         |
| State: CA District: 15                               |                                                   |             |                                         |
| SUBTOTAL of Disbursements This Page (optional)       |                                                   |             | 6000.00                                 |
|                                                      |                                                   | <b>&gt;</b> |                                         |
| TOTAL This Period (last page this line number only)  |                                                   |             | 1                                       |

| SCHEDULE B (FEC Form 3X)                                                                                  | Use separate schedule(s)                          | FOR LINE NUMBER: PAGE 170 OF 175 (check only one) |                                                   |
|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------|---------------------------------------------------|
| ITEMIZED DISBURSEMENTS                                                                                    | for each category of the<br>Detailed Summary Page | 21b<br>27                                         | 22 X 23 24 25 26<br>28a 28b 28c 29 30l            |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name |                                                   |                                                   |                                                   |
| NAME OF COMMITTEE (In Full)                                                                               |                                                   |                                                   |                                                   |
| New York Life Insurance Company                                                                           | Political Action Cor                              | mmittee                                           |                                                   |
| Full Name (Last, First, Middle Initial)                                                                   |                                                   |                                                   |                                                   |
| A. Bob Goodlatte For Congress Comn                                                                        | nittee                                            |                                                   | Date of Disbursement                              |
| Mailing Address P.O. Box 292                                                                              |                                                   |                                                   | 03 24 2016                                        |
| ,                                                                                                         | tate Zip Code                                     |                                                   | Transaction ID : 11053943                         |
| Roanoke Purpose of Disbursement                                                                           | VA 24002                                          |                                                   | 114110404101112 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Contribution                                                                                              |                                                   | 011                                               | Amount of Each Disbursement this Period           |
| Candidate Name                                                                                            |                                                   | Category/                                         | 1000.00                                           |
| Robert W. Goodlatte  Office Sought:  House Disbursem                                                      | ent For: 2016                                     | Туре                                              |                                                   |
| Senate X                                                                                                  | Primary General  Other (specify)                  |                                                   | Memo Item Contribution                            |
| State: VA District: 06                                                                                    |                                                   |                                                   |                                                   |
| Full Name (Last, First, Middle Initial)  B. Comstock For Congress                                         |                                                   |                                                   | Date of Disbursement                              |
| B. Comstock For Congress                                                                                  |                                                   |                                                   | M M / D D / Y Y Y Y                               |
| Mailing Address PO Box 831                                                                                |                                                   |                                                   | 03 24 2016                                        |
| Mc Lean                                                                                                   | tate Zip Code<br>VA 22101                         |                                                   | Transaction ID: 11053944                          |
| Purpose of Disbursement<br>Contribution                                                                   |                                                   | 011                                               | Amount of Each Disbursement this Period           |
| Candidate Name                                                                                            |                                                   | Category/                                         |                                                   |
| Barbara J. Comstock                                                                                       |                                                   | Type                                              | 1000.00                                           |
| Senate                                                                                                    | ent For: 2016 Primary                             |                                                   | Memo Item Contribution                            |
| Full Name (Last, First, Middle Initial)                                                                   |                                                   |                                                   |                                                   |
| C. Friends for Gregory Meeks                                                                              |                                                   |                                                   | Date of Disbursement                              |
| Mailing Address 153-01 Jamaica Avenue Suite 535                                                           |                                                   |                                                   | 03 24 2016                                        |
| •                                                                                                         | tate Zip Code<br>NY 11432                         |                                                   | Transaction ID : 11053945                         |
| Purpose of Disbursement Contribution                                                                      |                                                   |                                                   |                                                   |
| Candidate Name                                                                                            |                                                   | 011                                               | Amount of Each Disbursement this Period           |
| Gregory W. Meeks                                                                                          |                                                   | Category/<br>Type                                 | 2500.00                                           |
| Office Sought: House Disbursem                                                                            | ent For: 2016 Primary General Other (specify)     | 1,500                                             | Memo Item Contribution                            |
| 2.00.00.00                                                                                                |                                                   |                                                   |                                                   |
| SUBTOTAL of Disbursements This Page (optional)                                                            |                                                   | ·····•                                            | 4500.00                                           |
| TOTAL This Period (last page this line number only).                                                      |                                                   |                                                   |                                                   |

| SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS                                                              | Use separate schedule(s)                                    | dule(s) FOR LINE NUMBER: PAGE 1 (check only one) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| I EIVIIZED DISDURSEIVIEN IS                                                                                 | for each category of the<br>Detailed Summary Page           | 21b<br>27                                        | 22 X 23 24 25 26<br>28a 28b 28c 29 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Any information copied from such Reports and Statem<br>or for commercial purposes, other than using the nam | nents may not be sold or us<br>e and address of any politic | sed by any perso                                 | on for the purpose of soliciting contributions solicit contributions from such committee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| NAME OF COMMITTEE (In Full)                                                                                 | addiood of diff politic                                     | 00.1111111100 10                                 | The second secon |
| New York Life Insurance Company                                                                             | Political Action Co                                         | mmittee                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Full Name (Last, First, Middle Initial)                                                                     |                                                             |                                                  | Data of Dishurasanat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| - Friends for Gregory Meeks                                                                                 |                                                             |                                                  | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Mailing Address 153-01 Jamaica Avenue Suite 535                                                             |                                                             |                                                  | 03 24 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| •                                                                                                           | State Zip Code                                              |                                                  | Transaction ID : 11053946                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Jamaica Purpose of Disbursement                                                                             | NY 11432                                                    |                                                  | Transaction ib . 11033340                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Contribution                                                                                                |                                                             | 011                                              | Amount of Each Disbursement this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Candidate Name Gregory W. Meeks                                                                             |                                                             | Category/                                        | 5000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                             | nent For: 2016                                              | Туре                                             | Mamo Itam                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Senate<br>President                                                                                         | Primary ☐ General Other (specify) ▼                         |                                                  | Memo Item Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| State: NY District: 05                                                                                      |                                                             |                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Full Name (Last, First, Middle Initial)                                                                     |                                                             |                                                  | Data of Dishuranasa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| - Clarke For Congress                                                                                       |                                                             |                                                  | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Mailing Address 111-36 200th. Street                                                                        |                                                             |                                                  | 03 24 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Hollis                                                                                                      | State Zip Code<br>NY 11412                                  |                                                  | Transaction ID : 11053947                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Purpose of Disbursement<br>Contribution                                                                     |                                                             | 011                                              | Amount of Each Disbursement this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Candidate Name                                                                                              |                                                             | Category/                                        | 0500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Yvette D. Clarke                                                                                            |                                                             | Type                                             | 2500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Senate                                                                                                      | nent For: 2016 Primary General Other (specify)              |                                                  | Memo Item Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Full Name (Last, First, Middle Initial)                                                                     |                                                             |                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Clarke For Congress                                                                                         |                                                             |                                                  | Date of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                                             |                                                             |                                                  | M M / D D / Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Mailing Address 111-36 200th. Street                                                                        |                                                             |                                                  | 03 24 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| City                                                                                                        | state Zip Code                                              |                                                  | Towns of the Control of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Hollis                                                                                                      | NY 11412                                                    |                                                  | Transaction ID: 11053948                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Purpose of Disbursement<br>Contribution                                                                     |                                                             |                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Candidate Name                                                                                              |                                                             | 011                                              | Amount of Each Disbursement this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Yvette D. Clarke                                                                                            |                                                             | Category/<br>Type                                | 5000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Office Sought: House Disbursem Senate President                                                             | nent For: 2016 Primary                                      | туре                                             | Memo Item<br>Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| State: NY District: 09                                                                                      |                                                             |                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| SUBTOTAL of Disbursements This Page (optional)                                                              |                                                             | ·····•                                           | 12500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| TOTAL This Period (last page this line number only).                                                        |                                                             |                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS                                                          | Use separate schedule(s                           |                                         |                                                |
|----------------------------------------------------------------------------------------------------------|---------------------------------------------------|-----------------------------------------|------------------------------------------------|
| TEMPLE DIODOMOLIMENTO                                                                                    | for each category of the<br>Detailed Summary Page | 21b<br>27                               | 22 X 23 24 25 26<br>28a 28b 28c 29 30          |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nar | ments may not be sold or u                        | ised by any perso                       | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full)                                                                              | no and address of any poin                        | iloar committee to                      | Solicit Contributions from Such Committee.     |
| New York Life Insurance Company                                                                          | Political Action Co                               | ommittee                                |                                                |
| Full Name (Last, First, Middle Initial)                                                                  |                                                   |                                         |                                                |
| - Friends Of Bennie Thompson                                                                             |                                                   |                                         | Date of Disbursement                           |
| Mailing Address P.O. Box 100                                                                             |                                                   |                                         | 03 29 2016                                     |
| ,                                                                                                        | State Zip Code                                    |                                         | Transaction ID : 11058752                      |
| Bolton Purpose of Disbursement                                                                           | MS 39041                                          |                                         | 11411546461112 1 11556162                      |
| Contribution                                                                                             |                                                   | 011                                     | Amount of Each Disbursement this Period        |
| Candidate Name                                                                                           |                                                   | Category/                               | 4000.00                                        |
| Bennie G. Thompson  Office Sought:  House Disburser                                                      |                                                   | Туре                                    |                                                |
| Office Sought: House Disburser  Senate President                                                         | ment For: 2016 Primary                            |                                         | Memo Item Contribution                         |
| State: MS District: 02                                                                                   |                                                   |                                         |                                                |
| Full Name (Last, First, Middle Initial)                                                                  |                                                   |                                         |                                                |
| Mike Kelly For Congress                                                                                  |                                                   |                                         | Date of Disbursement                           |
| Mailing Address PO Box 476                                                                               |                                                   |                                         | 03 29 2016                                     |
| City Lyndora Purpose of Disbursement                                                                     | State Zip Code<br>PA 16045                        |                                         | Transaction ID: 11058753                       |
| Contribution                                                                                             |                                                   | 011                                     | Amount of Each Disbursement this Period        |
| Candidate Name                                                                                           |                                                   | Category/                               | 500.00                                         |
| George J. Kelly Jr.                                                                                      |                                                   | Type                                    | 500.00                                         |
|                                                                                                          | ment For: 2016 Primary General Other (specify)    |                                         | Memo Item Contribution                         |
| Full Name (Last, First, Middle Initial)                                                                  |                                                   |                                         |                                                |
| Forbes For Congress                                                                                      |                                                   |                                         | Date of Disbursement                           |
| Mailing Address 911 First Colonial Road, Suite 200                                                       |                                                   |                                         | 03 29 2016                                     |
| City<br>Virginia Beach                                                                                   | State Zip Code<br>VA 23454                        |                                         | Transaction ID: 11058755                       |
| Purpose of Disbursement<br>Contribution                                                                  |                                                   | 011                                     |                                                |
| Candidate Name                                                                                           |                                                   |                                         | Amount of Each Disbursement this Period        |
| J. Randy Forbes                                                                                          |                                                   | Category/<br>Type                       | 1000.00                                        |
|                                                                                                          | ment For: 2016 Primary General Other (specify)    | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Memo Item<br>Contribution                      |
|                                                                                                          |                                                   |                                         | EE00.00                                        |
| SUBTOTAL of Disbursements This Page (optional)                                                           |                                                   | ·····•                                  | 5500.00                                        |
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| SCHEDULE B (FEC Form 3X)                                                                                  | Liee conor                           | ate schedule(s)                                   | , I TOTT EINE NOMBEIT.             |                       | = 173 C              | 173 OF 175             |                       |             |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------|------------------------------------|-----------------------|----------------------|------------------------|-----------------------|-------------|
| ITEMIZED DISBURSEMENTS                                                                                    | for each ca                          | ate scriedule(s)<br>ategory of the<br>ummary Page | (check only 21b 27                 | one)<br>22<br>28a     | 23<br>28b            | 24<br>28c              | 25<br>29              | 30          |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | ents may no                          | ot be sold or use<br>ss of any politica           | ed by any perso<br>al committee to | on for the solicit co | purpose ontributions | f soliciting from such | contribut<br>committe | ions<br>ee. |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Company                                              | Political                            | Action Con                                        | nmittee                            |                       |                      |                        |                       |             |
| Full Name (Last, First, Middle Initial)  A. JEFF PAC                                                      |                                      |                                                   |                                    |                       | Disburse             |                        | V                     | V           |
| Mailing Address 2150 River Plaza Drive #150                                                               |                                      |                                                   |                                    | 03                    | 29                   |                        | 2016                  | Y           |
| Sacramento                                                                                                | tate<br>CA                           | Zip Code<br>95833                                 |                                    | Trans                 | action ID            | : 11058757             |                       |             |
| Purpose of Disbursement<br>Contribution                                                                   |                                      |                                                   | 011                                | Amoun                 | t of Each            | Disburseme             | ent this F            | Period      |
| Candidate Name                                                                                            |                                      |                                                   | Category/<br>Type                  |                       |                      |                        | 5000.0                | 00          |
|                                                                                                           | ent For:<br>Primary<br>Other (specif | General<br>fy) ▼                                  |                                    | Mei<br>Contribu       | mo Item<br>ution     |                        |                       |             |
| Full Name (Last, First, Middle Initial)  B. Road to Freedom Political Action C                            | ommitte                              | e                                                 |                                    | М = М                 | f Disburse           | D / Y                  | Y                     | Y           |
| Mailing Address 228 S Washington St Suite 115 City S                                                      | toto                                 | Zin Codo                                          |                                    | 03                    | 29                   | 9                      | 2016                  |             |
|                                                                                                           | tate<br>VA                           | Zip Code<br>22314                                 |                                    | Trans                 | action ID            | : 11058759             | 1                     |             |
| Contribution  Candidate Name                                                                              |                                      |                                                   | 011<br>Category/                   | Amoun                 | t of Each            | Disburseme             | ent this F            | Period      |
|                                                                                                           |                                      | General                                           | Туре                               | Mer<br>Contrib        | mo Item<br>ution     | -1-5-1                 | 5000.0                | 00          |
| Full Name (Last, First, Middle Initial) - Paragraph Two PAC                                               |                                      |                                                   |                                    | Date of               | Disburse             |                        | Y                     | V           |
| Mailing Address 2631 Willow Lake Drive                                                                    |                                      |                                                   |                                    | 03                    | 29                   |                        | 2016                  |             |
| Greenwood                                                                                                 | tate<br>IN                           | Zip Code<br>46143                                 |                                    | Trans                 | action ID            | : 11058761             |                       |             |
| Purpose of Disbursement Contribution Candidate Name                                                       |                                      |                                                   | 011<br>Category/<br>Type           | Amoun                 | t of Each            | Disburseme             | ent this F<br>2500.0  | -           |
|                                                                                                           | ent For:<br>Primary<br>Other (specif | General<br>fy) ▼                                  | 7,1                                | Mei<br>Contribu       | mo Item<br>ution     |                        |                       |             |
| SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)       |                                      |                                                   |                                    | <u> </u>              |                      |                        | 12500.0               | 00          |

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| SCHEDULE B (FEC Form 3X)                                                                               | Lico congrato cohodulo(s)                                               | FOR LINE I               |                                                                     |
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| TEMIZED DISBURSEMENTS                                                                                  | Use separate schedule(s) for each category of the Detailed Summary Page | (check only 21b 27       | one)  22 X 23 24 25 26  28a 28b 28c 29 30                           |
| Any information copied from such Reports and State or for commercial purposes, other than using the na |                                                                         |                          |                                                                     |
| NAME OF COMMITTEE (In Full)  New York Life Insurance Company                                           | y Political Action Com                                                  | mittee                   |                                                                     |
| Full Name (Last, First, Middle Initial) - EDPAC                                                        |                                                                         |                          | Date of Disbursement                                                |
| Mailing Address 499 S. Capitol Street SW<br>Suite 422                                                  |                                                                         |                          | 03 29 2016                                                          |
| City<br>Washington                                                                                     | State Zip Code<br>DC 20003                                              |                          | Transaction ID : 11058762                                           |
| Purpose of Disbursement Contribution Candidate Name                                                    |                                                                         | 011                      | Amount of Each Disbursement this Period                             |
|                                                                                                        | ment For:                                                               | Category/<br>Type        | 5000.00<br>Memo Item                                                |
| State: Senate  President  State: District:                                                             | Primary General Other (specify) ▼                                       |                          | Contribution                                                        |
| Full Name (Last, First, Middle Initial)  CMR Political Action Committee  Mailing Address P.O. Box 2485 |                                                                         |                          | Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City<br>Springfield                                                                                    | State Zip Code<br>VA 22152                                              |                          | Transaction ID : 11058763                                           |
| Purpose of Disbursement<br>Contribution                                                                |                                                                         | 011                      | Amount of Each Disbursement this Period                             |
| Candidate Name                                                                                         |                                                                         | Category/<br>Type        | 5000.00                                                             |
| Office Sought:  House Senate President State:  Disburse                                                | ment For: Primary General Other (specify) ▼                             |                          | Memo Item Contribution                                              |
| Full Name (Last, First, Middle Initial) - BadgerPAC                                                    |                                                                         |                          | Date of Disbursement                                                |
| Mailing Address P.O. Box 184                                                                           |                                                                         |                          | 03 29 2016                                                          |
| City<br>La Crosse                                                                                      | State Zip Code<br>WI 54602                                              |                          | Transaction ID: 11058764                                            |
| Purpose of Disbursement Contribution  Candidate Name  BadgerPAC                                        |                                                                         | 011<br>Category/<br>Type | Amount of Each Disbursement this Period 5000.00                     |
|                                                                                                        | ment For: Primary General Other (specify) ▼                             | Турс                     | Memo Item Contribution                                              |
| State: District:                                                                                       |                                                                         |                          |                                                                     |

| SCHEDULE B (FEC Form 3X)                                                                                 | Han name and the Color                                                  | FOR LINE NUMBER: PAGE 175 |                                          |  |
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| ITEMIZED DISBURSEMENTS                                                                                   | Use separate schedule(s) for each category of the Detailed Summary Page | (check only 21b 27        | one)  22 X 23 24 25 26 28a 28b 28c 29 30 |  |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the nam |                                                                         |                           |                                          |  |
| NAME OF COMMITTEE (In Full)                                                                              | , , ,                                                                   |                           |                                          |  |
| New York Life Insurance Company                                                                          | Political Action Con                                                    | nmittee                   |                                          |  |
| Full Name (Last, First, Middle Initial)                                                                  |                                                                         |                           |                                          |  |
| Continuing America's Strength And                                                                        | Security PAC                                                            |                           | Date of Disbursement                     |  |
| Mailing Address P.O. Box 80505                                                                           | 7: 0.1                                                                  |                           | 03 29 2016                               |  |
| ,                                                                                                        | State Zip Code<br>LA 70898                                              |                           | Transaction ID: 11059040                 |  |
| Purpose of Disbursement                                                                                  | LA 70090                                                                |                           |                                          |  |
| Contribution  Candidate Name                                                                             |                                                                         | 011                       | Amount of Each Disbursement this Period  |  |
|                                                                                                          |                                                                         | Category/<br>Type         | 5000.00                                  |  |
|                                                                                                          | nent For:  Primary General  Other (specify)                             |                           | Memo Item Contribution                   |  |
| State: District:                                                                                         |                                                                         |                           |                                          |  |
| Full Name (Last, First, Middle Initial)  3.                                                              |                                                                         |                           | Date of Disbursement                     |  |
| Mailing Address                                                                                          |                                                                         |                           | M M / D D / Y Y Y Y                      |  |
| City                                                                                                     | state Zip Code                                                          |                           |                                          |  |
| Purpose of Disbursement                                                                                  |                                                                         |                           |                                          |  |
|                                                                                                          |                                                                         | !!                        | Amount of Each Disbursement this Period  |  |
| Candidate Name                                                                                           |                                                                         | Category/<br>Type         |                                          |  |
|                                                                                                          | nent For:  Primary General  Other (specify)                             |                           | Memo Item                                |  |
| State: District:                                                                                         |                                                                         |                           |                                          |  |
| Full Name (Last, First, Middle Initial)  C.                                                              |                                                                         |                           | Date of Disbursement                     |  |
| Mailing Address                                                                                          |                                                                         |                           | M M / D D / Y Y Y Y                      |  |
| City                                                                                                     | State Zip Code                                                          |                           |                                          |  |
| Purpose of Disbursement                                                                                  |                                                                         |                           |                                          |  |
| Candidate Name                                                                                           |                                                                         | Category/<br>Type         | Amount of Each Disbursement this Period  |  |
|                                                                                                          | nent For: Primary General Other (specify)                               | Туро                      | Memo Item                                |  |
| Oldio.                                                                                                   |                                                                         |                           |                                          |  |
| SUBTOTAL of Disbursements This Page (optional)                                                           |                                                                         | ·····•                    | 5000.00                                  |  |
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